WEST Search History

DATE: Sunday, July 27, 2003

Set Name side by side	Query	Hit Count	Set Name result set		
DB = USPT, PG	PB,JPAB,EPAB,DWPI; PLUR=YES; OP=ADJ	7			
L12	antiport with modulator	3	L12		
L11	antiport near modulator	1	L11		
DB=; PLUR=YES; OP=ADJ					
L10	15 and L9	59	L10		
L9	timolol	2181	L9		
L8	13 and 16	1	L8		
L7	15 and L6	1	L7		
L6	cariporide	31	L6		
L5	13 and L4	263	L5		
L4	11 or 12	32589	L4		
L3	glaucoma	12202	L3		
L2	sodium with exchange\$2	26546	L2		
DB=USPT,PGPB; PLUR=YES; OP=ADJ					
L1	chloride with exchange\$2	10576	L1		

END OF SEARCH HISTORY

Viprinex (ancrod) (III)

Knoll

stroke

associated with **ESRD** types 1 and 2 HOE 901 **HMR** diabetes (insulin glargine) (III) Genentech diabetic nerve growth factor (III) peripheral neuropathy Alteon diabetes, ESRD Pimagedine (aminoguanidine) (III) Amylin diabetes pramlintide (III) Pfizer diabetic zopolrestat (III) neuropathy Starlix Novartis glaucoma (nateglinide) (III) Cynt (moxonidine) Lilly/Solvay hypertension (III) HOE 642A HMR acute coronary (cariporide) (III) syndrome lanoteplase (III) **BMS** acute myocardial infarction Micardis Boeh Ingelheim hypertension (telmisartan) (AS) BMS hypertension omapatrilat (III) SB/Int'l Society hypertension Teveten on Hypertension (eprosartan) (IV) in Blacks TNK (2nd Genentech acute MI generation TPA) (III) Ariflo (DPE IV COPD SB inhibitor) (III) FluMist Aviron influenza (live attenuated intranasal flu vaccine) (AS) Foradil Novartis asthma, COPD (formoterol mumaratae powder for inhalation) (AS) influenza neuraminidase Roche inhibitor (III) Oxsodrol BioTechnology prevention of (superoxide General bronchopulmonary dismutase) (III) dysplasia in premature infants Relenza Glaxo Wellcome influenza (zanamivir) (III) Surfaxin Discovery acute Laboratories (lucinactant) respiratory (III) distress syndrome in adults RPR Synercid nosocomial pneumonia (quinupristin/ dalfopristin) (AS) BMS Tequin pneumonia (gatifloxacin) (III) sickle cell Cordox Cypros (fructose-1,6 disease diphosphate) (III) sickle cell Flocor CytRx (poloxamer 188, disease purified) (III) Interneuron stroke CerAxon (citicoline) (III) Glaxo Wellcome GV150526 (III) stroke

```
been elucidated. We have studied continuously cultured bovine PE cells.
     Acid-activated 22Na+ uptake was inhibited by cariporide, EIPA
     (ethyl-isopropyl-amiloride) and amiloride, at concentrations
     characteristic of the NHE-1 isoform. Videomicroscopy of BCECF-loaded PE
     cells verified the presence of.
of Organisms
        aqueous humor: sensory system; ciliary epithelium: sensory system; gap
        junctions; pigmented ciliary epithelial cell: sensory system
          glaucoma: eye disease
     Chemicals & Biochemicals
        chloride ion hydrogen bicarbonate antiporters; chloride ions; sodium
        ion: uptake; sodium ion hydrogen ion antiporters
     Alternate Indexing
          Glaucoma (MeSH)
    ANSWER 4 OF 4 PHIN COPYRIGHT 2003 PJB on STN
ACCESSION NUMBER:
                    1998:15688 PHIN
DOCUMENT NUMBER:
                    S00593210
DATA ENTRY DATE:
                    27 Aug 1998
                    156 drugs for African-Americans studied
TITLE:
SOURCE:
                    Scrip-Online-plus (1998)
DOCUMENT TYPE:
                    Newsletter
FILE SEGMENT:
                    FULL
                . such as asthma; 27 for heart disease/hypertension; 18 for
     HIV infection; 16 for diabetes; nine for stroke; five each for
     glaucoma and sickle cell disease; and four for end-stage renal
     disease (ESRD).
     Glaucoma occurs six to eight times more often among
     African-Americans than whites, and it occurs earlier - by age 70, one in
     ten has glaucoma, compared with one in 50 whites.
     Product
                         Company
                                             Indication
     (status)
     abacavir (II/III)
                         Glaxo Wellcome
                                             HIV infection
                         Glaxo Wellcome
                                             HIV infection Preveon
     amprenavir (III)
                         Gilead Sciences
                                             HIV infection
     (II/III)
     (adefovir dipivoxil)
     Provir (III)
                         Shaman
                                             HIV infection
     valganciclovir (III)Roche
                                             HIV infection
     AG3340 (II/III)
                         Agouron
                                             prostate cancer
     dendritic cell
                         Dendreon
                                             prostate cancer
     therapy (II/III)
     Eloxatin (III)
                         Sanofi
                                             liver, pancreatic
     (oxaliplatin)
                                             cancer
     eniluracil (II/III) Glaxo Wellcome
                                             pancreatic cancer
     exisulind/FGN-1
                         Cell Pathways
                                             prevention of
     (II/III)
                                              recurrence after
                                              prostatectomy
     Lutrin
                         Pharmacyclics
                                             pancreatic,
     (photodynamic
                                              prostate cancers
      therapy) (II/III)
     Maxamine (histamine Maxim
                                             multiple myeloma,
     dihydrochloride)
                                              prostate cancer
     (III)
     Mitalactol (III)
                         Biopharmaceutics
                                             cervical cancer
     satraplatin (III)
                                             prostate cancer
                         BMS
                         SmithKline Beecham
                                             diabetes
     Avandi (III)
     Avapro (irbesartan) BMS
                                             diabetic
     (III/AS)
                                              neuropathy,
                                              ESRD,
                                              hypertension
    Hectoral
                         Bone Care Int'l
                                              secondary
```

hyperpara-

thyroidism

IT

IT

ΙT

IT

TX

TX

(1-alpha-hydroxy

vitamin D2) (AS)

cariporide, particularly in combination with bumetanide to simultaneously block the symport.

DETD

. . . A therapeutically effective amount of the combined agent is that amount necessary to significantly reduce or eliminate symptoms associated with glaucoma, particularly to reduce or prevent elevated IOP more effectively that the effect of one of the compositions alone would have..

L37 ANSWER 2 OF 4 CAPLUS COPYRIGHT 2003 ACS on STN

2000:814312 CAPLUS ACCESSION NUMBER:

DOCUMENT NUMBER: 133:344642

Methods using antiport modulators for controlling TITLE:

intraocular pressure

Civan, Mortimer M.; MacKnight, Anthony D. INVENTOR(S):

The Trustees of the University of Pennsylvania, USA PATENT ASSIGNEE(S):

PCT Int. Appl., 65 pp. SOURCE:

CODEN: PIXXD2

DOCUMENT TYPE:

LANGUAGE:

Patent English

FAMILY ACC. NUM. COUNT:

PATENT INFORMATION:

```
PATENT NO.
              KIND DATE
                                  APPLICATION NO. DATE
-----
                     20001116
                                  WO 2000-US12551 20000508
WO 2000067756 A1
   W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR,
       CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU,
       ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU,
       LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE,
       SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA,
       ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
   RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE,
       DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
       CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
                                US 1999-133180P P 19990507
```

PRIORITY APPLN. INFO.:

THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS REFERENCE COUNT: RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

intraocular pressure glaucoma treatment antiport modulator; ST sodium proton exchanger modulation intraocular pressure; chloride bicarbonate exchanger modulation intraocular pressure

100-88-9, Cyclamate 1154-25-2 1214-79-5, Dimethylamiloride TT 2609-46-3, Amiloride 2609-46-3D, Amiloride, analogs 26839-75-8, Timolol 159138-80-4, Cariporide

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(antiport modulators for controlling intraocular pressure)

L37 ANSWER 3 OF 4 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN

DUPLICATE 1

CORPORATE SOURCE:

2000:449189 BIOSIS ACCESSION NUMBER: DOCUMENT NUMBER: PREV200000449189

Na+/H+ and Cl-/HCO3--antiporters of bovine pigmented TITLE:

ciliary epithelial cells.

Counillon, L.; Touret, Nicolas; Bidet, Michel; AUTHOR (S):

Peterson-Yantorno, K.; Coca-Prados, M.; Stuart-Tilley, Alan; Wilhelm, Sabine; Alper, S. L.; Civan, M. M. (1) (1) Depts. of Physiology and Medicine, University of

Pennsylvania, A303 Richards Building, Philadelphia, PA,

19104-6085 USA Pfluegers Archiv European Journal of Physiology, SOURCE:

(September, 2000) Vol. 440, No. 5, pp. 667-678. print.

ISSN: 0031-6768.

DOCUMENT TYPE: Article English LANGUAGE: SUMMARY LANGUAGE: English

Medical therapy of glaucoma commonly aims at slowing aqueous humor formation by the ocular ciliary epithelial bilayer, but underlying mechanisms are poorly understood. The. . . paired antiporters have not

```
s timolol/cn
             1 TIMOLOL/CN
=> d l1
     ANSWER 1 OF 1 REGISTRY COPYRIGHT 2003 ACS on STN
Ll
RN
     26839-75-8 REGISTRY
     2-Propanol, 1-[(1,1-dimethylethyl)amino]-3-[[4-(4-morpholinyl)-1,2,5-
CN
     thiadiazol-3-yl]oxy]-, (2S)- (9CI)
                                          (CA INDEX NAME)
OTHER CA INDEX NAMES:
     1,2,5-Thiadiazole, 2-propanol deriv.
     2-Propanol, 1-(tert-butylamino)-3-[(4-morpholino-1,2,5-thiadiazol-3-
     y1)oxy]-, (S)-(-)-(8CI)
     2-Propanol, 1-[(1,1-dimethylethyl)amino]-3-[[4-(4-morpholinyl)-1,2,5-
CN
     thiadiazol-3-yl]oxy]-, (S)-
OTHER NAMES:
CN
     (-)-S-Timolol
CN
     (-)-Timolol
CN
     (S) -Timolol
CN
     1-Timolol
     L-Timolol
CN
CN
     Oftensin
CN
     Timolol
FS
     STEREOSEARCH
     131628-37-0, 194288-09-0
DR
\mathtt{MF}
     C13 H24 N4 O3 S
CI
     COM
                  ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*, BIOBUSINESS, BIOSIS,
LC
     STN Files:
       BIOTECHNO, CA, CANCERLIT, CAPLUS, CASREACT, CBNB, CHEMLIST, CIN, CSCHEM,
       DDFU, DIOGENES, DRUGPAT, DRUGU, EMBASE, HSDB*, IFICDB, IFIPAT, IFIUDB,
       IPA, MEDLINE, MRCK*, NIOSHTIC, PHAR, PHARMASEARCH, PROMT, SPECINFO,
       TOXCENTER, USPAT2, USPATFULL, VETU
         (*File contains numerically searchable property data)
     Other Sources:
                      EINECS**, NDSL**, TSCA**, WHO
         (**Enter CHEMLIST File for up-to-date regulatory information)
Absolute stereochemistry. Rotation (-).
                    NHBu-t
              OH
**PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT**
            1161 REFERENCES IN FILE CA (1947 TO DATE)
              19 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
            1164 REFERENCES IN FILE CAPLUS (1947 TO DATE)
=> s amiloride/cn
L2
             1 AMILORIDE/CN
=> d 12
     ANSWER 1 OF 1 REGISTRY COPYRIGHT 2003 ACS on STN
L2
RN
     2609-46-3 REGISTRY
CN
     Pyrazinecarboxamide, 3,5-diamino-N-(aminoiminomethyl)-6-chloro- (9CI)
```

INDEX NAME)
OTHER CA INDEX NAMES:

```
Pyrazinecarboxamide, N-amidino-3,5-diamino-6-chloro- (7CI, 8CI)
ÇΝ
OTHER NAMES:
      (3,5-Diamino-6-chloropyrazinoyl) guanidine
CN
CN
     Amiloride
     Amipramidin
CN
     Guanamprazine
CN
CN
     MK 870
     N-Amidino-3,5-diamino-6-chloropyrazinecarboxamide
CN
FS
     3D CONCORD
DR
     137053-85-1
MF
     C6 H8 Cl N7 O
ÇΙ
     COM
LC
                   ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*, BIOBUSINESS, BIOSIS,
     STN Files:
       BIOTECHNO, CA, CANCERLIT, CAOLD, CAPLUS, CASREACT, CBNB, CEN, CHEMCATS,
       CHEMLIST, CIN, CSCHEM, DDFU, DIOGENES, DRUGPAT, DRUGU, EMBASE, IFICDB,
       IFIPAT, IFIUDB, IPA, MEDLINE, MRCK*, NIOSHTIC, PHAR, PROMT, SPECINFO,
       TOXCENTER, USAN, USPAT2, USPATFULL
          (*File contains numerically searchable property data)
     Other Sources:
                       EINECS**, WHO
          (**Enter CHEMLIST File for up-to-date regulatory information)
               · NH·
                   C-NH<sub>2</sub>
                   NH
             0
**PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT**
             1952 REFERENCES IN FILE CA (1947 TO DATE)
              109 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
             1957 REFERENCES IN FILE CAPLUS (1947 TO DATE)
                1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)
=> s ethyl isopropyl amiloride
       5535816 ETHYL
         84162 ISOPROPYL
            131 AMILORIDE
L3
              0 ETHYL ISOPROPYL AMILORIDE
                  (ETHYL (W) ISOPROPYL (W) AMILORIDE)
=> s isopropyl ethyl amiloride
         84162 ISOPROPYL
       5535816 ETHYL
           131 AMILORIDE
L4
              0 ISOPROPYL ETHYL AMILORIDE
                  (ISOPROPYL (W) ETHYL (W) AMILORIDE)
=> s amiloride
           131 AMILORIDE
=> s ethyl amiloride
       5535816 ETHYL
           131 AMILORIDE
L6
             4 ETHYL AMILORIDE
                  (ETHYL (W) AMILORIDE)
```

ANSWER 1 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN

=> d 16 1-4

L6

RN 67879-54-3 REGISTRY

CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-[(2-

hydroxyethyl)amino] - (9CI) (CA INDEX NAME)

OTHER NAMES:

CN 5-[N-(2-Hydroxyethyl)]amiloride

FS 3D CONCORD

MF C8 H12 Cl N7 O2

CI COM

LC STN Files: BEILSTEIN*, CA, CAPLUS

(*File contains numerically searchable property data)

$$\begin{array}{c|c} & \text{O} & \text{NH} \\ & || & || \\ \text{C-NH-C-NH}_2 \\ \\ \text{HO-CH}_2 - \text{CH}_2 - \text{NH} \\ \end{array}$$

PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

2 REFERENCES IN FILE CA (1947 TO DATE)

2 REFERENCES IN FILE CAPLUS (1947 TO DATE)

L6 ANSWER 2 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN

RN 2235-96-3 REGISTRY

CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-(ethylamino)-

(9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Pyrazinecarboxamide, N-amidino-3-amino-6-chloro-5-(ethylamino)- (7CI, 8CI)

OTHER NAMES:

CN 5-(N-Ethyl)amiloride

FS 3D CONCORD

MF C8 H12 Cl N7 O

LC STN Files: BEILSTEIN*, CA, CAOLD, CAPLUS, IFICDB, IFIPAT, IFIUDB,

SPECINFO

(*File contains numerically searchable property data)

PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

11 REFERENCES IN FILE CA (1947 TO DATE)

11 REFERENCES IN FILE CAPLUS (1947 TO DATE)

1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

L6 ANSWER 3 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN

RN 2086-31-9 REGISTRY

CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-

(diethylamino) - (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Pyrazinecarboxamide, N-amidino-3-amino-6-chloro-5-(diethylamino)- (7CI, 8CI)

OTHER NAMES:

CN 5-(N, N-Diethyl) amiloride

FS 3D CONCORD

MF C10 H16 C1 N7 O

CI COM
LC STN Files: BEILSTEIN*, CA, CANCERLIT, CAOLD, CAPLUS, IFICDB, IFIPAT,
IFIUDB, IPA, MEDLINE
(*File contains numerically searchable property data)

PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

12 REFERENCES IN FILE CA (1947 TO DATE)

12 REFERENCES IN FILE CAPLUS (1947 TO DATE)

1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

L6 ANSWER 4 OF 4 REGISTRY COPYRIGHT 2003 ACS on STN

RN 1148-33-0 REGISTRY

CN Pyrazinecarboxamide, 3-amino-N-(aminoiminomethyl)-6-chloro-5-(ethylmethylamino)- (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Pyrazinecarboxamide, N-amidino-3-amino-6-chloro-5-(ethylmethylamino)-(7CI, 8CI)

OTHER NAMES:

CN 5-(N-Methyl-N-ethyl)amiloride

FS 3D CONCORD

MF C9 H14 Cl N7 O

CI COM

LC STN Files: BEILSTEIN*, CA, CAOLD, CAPLUS, IFICDB, IFIPAT, IFIUDB (*File contains numerically searchable property data)

$$\begin{array}{c|c} & \text{O} & \text{NH} \\ \parallel & \parallel \\ \text{C-NH-C-NH}_2 \\ \\ \text{Et-N} & \text{NH}_2 \\ \\ \text{Me} \end{array}$$

PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

17 REFERENCES IN FILE CA (1947 TO DATE)

17 REFERENCES IN FILE CAPLUS (1947 TO DATE)

1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

=> s cariporide/cn

L7 1 CARIPORIDE/CN

=> d 17

L7 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2003 ACS on STN

RN 159138-80-4 REGISTRY

CN Benzamide, N-(aminoiminomethyl)-4-(1-methylethyl)-3-(methylsulfonyl)-(9CI) (CA INDEX NAME)

OTHER NAMES:

CN Cariporide

FS 3D CONCORD

MF C12 H17 N3 O3 S

CI COM

SR CA

LC

STN Files: ADISINSIGHT, ADISNEWS, BIOBUSINESS, BIOSIS, BIOTECHNO, CA, CAPLUS, CBNB, CIN, DDFU, DRUGNL, DRUGPAT, DRUGU, DRUGUPDATES, EMBASE, IPA, MRCK*, PHAR, PROMT, SYNTHLINE, TOXCENTER, USAN, USPAT2, USPATFULL (*File contains numerically searchable property data)

PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

90 REFERENCES IN FILE CA (1947 TO DATE)
92 REFERENCES IN FILE CAPLUS (1947 TO DATE)

=> file medicine
FILE 'DRUGMONOG' ACCESS NOT AUTHORIZED
COST IN U.S. DOLLARS

SINCE FILE TOTAL ENTRY SESSION 64.80 65.01

FULL ESTIMATED COST

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CA INDEXING COPYRIGHT (C) 2003 AMERICAN CHEMICAL SOCIETY (ACS)
=>
=> d his
     (FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)
     FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003
L1
              1 S TIMOLOL/CN
              1 S AMILORIDE/CN
L2
              0 S ETHYL ISOPROPYL AMILORIDE
L3
              0 S ISOPROPYL ETHYL AMILORIDE
L4
            131 S AMILORIDE
1.5
1.6
              4 S ETHYL AMILORIDE
L7
              1 S CARIPORIDE/CN
     FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN,
     DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE,
     ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE,
     NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON
     27 JUL 2003
=> s l1 or timolol
'CN' IS NOT A VALID FIELD CODE
 27 FILES SEARCHED...
'CN' IS NOT A VALID FIELD CODE
'CN' IS NOT A VALID FIELD CODE
'CN' IS NOT A VALID FIELD CODE
L8
         31558 L1 OR TIMOLOL
=> s 12 or amiloride
'CN' IS NOT A VALID FIELD CODE
 33 FILES SEARCHED...
L9
         64288 L2 OR AMILORIDE
=> s 17 or acriporide
'CN' IS NOT A VALID FIELD CODE
```

'CN' IS NOT A VALID FIELD CODE 'CN' IS NOT A VALID FIELD CODE

```
'CN' IS NOT A VALID FIELD CODE
           507 L7 OR ACRIPORIDE
L10
=> s 17 or cariporide
'CN' IS NOT A VALID FIELD CODE
'CN' IS NOT A VALID FIELD CODE
  13 FILES SEARCHED...
'CN' IS NOT A VALID FIELD CODE
  26 FILES SEARCHED...
'CN' IS NOT A VALID FIELD CODE
          1505 L7 OR CARIPORIDE
L11
=> d his
     (FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)
     FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003
              1 S TIMOLOL/CN
L1
L2
              1 S AMILORIDE/CN
L3
              0 S ETHYL ISOPROPYL AMILORIDE
L4
              O S ISOPROPYL ETHYL AMILORIDE
            131 S AMILORIDE
L5
              4 S ETHYL AMILORIDE
L6
L7
              1 S CARIPORIDE/CN
     FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN,
     DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE,
     ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE,
     NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON
     27 JUL 2003
          31558 S L1 OR TIMOLOL
L8
          64288 S L2 OR AMILORIDE
L9
            507 S L7 OR ACRIPORIDE
L10
           1505 S L7 OR CARIPORIDE
L11
=> s 18 or 19 or 111
         95722 L8 OR L9 OR L11
L12
=> s glaucoma
        159500 GLAUCOMA
L13
=> s aqueous humor
         34931 AQUEOUS HUMOR
L14
=> s s antiport (s) modulat?
 23 FILES SEARCHED...
             0 S ANTIPORT (S) MODULAT?
L15
=> s antiport (s) modulat?
           457 ANTIPORT (S) MODULAT?
L16
                                                         r
=> s antiport? (s) modulat?
           923 ANTIPORT? (S) MODULAT?
L17
```

'CN' IS NOT A VALID FIELD CODE

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=> s l12 and l13
         9965 L12 AND L13
=> s 118 and 117
           13 L18 AND L17
=> dup rem
ENTER L# LIST OR (END):119
DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGLAUNCH,
DRUGMONOG2, KOSMET, MEDICONF, NUTRACEUT, PCTGEN, PHARMAML'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L19
             10 DUP REM L19 (3 DUPLICATES REMOVED)
=> d 120 1-10 ibib, kwic
L20 ANSWER 1 OF 10 CAPLUS COPYRIGHT 2003 ACS on STN DUPLICATE 1
ACCESSION NUMBER:
                        2003:334635 CAPLUS
DOCUMENT NUMBER:
                        138:331729
TITLE:
                        Novel combination therapy to treat glaucoma
                        Civan, Mortimer M.; Jacobson, Kenneth A.; MacKnight,
INVENTOR(S):
                        Anthony D. C.; Mitchell, Claire H.; Stone, Richard A.
PATENT ASSIGNEE(S):
                        U.S. Pat. Appl. Publ., 19 pp., Cont.-in-part of U.S.
SOURCE:
                        Ser. No. 9,581.
                        CODEN: USXXCO
DOCUMENT TYPE:
                        Patent
                        English
LANGUAGE:
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:
     PATENT NO.
                    KIND DATE
                                         APPLICATION NO. DATE
                    ----
                                          ______
     US 2003083227
                     A1 20030501
                                          US 2002-217755 20020813
PRIORITY APPLN. INFO.:
                                       US 1999-133180P P 19990507
                                       US 2001-312036P P 20010813
                                                       A2 20020430
                                       US 2002-9581
TΤ
    Novel combination therapy to treat glaucoma
     glaucoma treatment modulation aq humor secretion; biol transport
     modulation aq humor glaucoma; sodium hydrogen exchanger
     inhibition glaucoma treatment; chloride channel inhibition aq
     humor formation; bumetanide dimethylamiloride dorzolamide intraocular
     pressure redn
     Purinoceptor antagonists
        (A3; combination therapy to treat glaucoma by controlling
        secretion of excess fluids into aq. humor)
IT
     Adenosine receptors
     RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (A3, lower intraocular pressure in mice lacking gene for; combination
        therapy to treat glaucoma by controlling secretion of excess
        fluids into aq. humor)
TT
     Biological transport
        (antiport, modulator of; combination therapy to
        treat glaucoma by controlling secretion of excess fluids into
       aq. humor)
    Eye
        (aq. humor; combination therapy to treat glaucoma by
       controlling secretion of excess fluids into aq. humor)
TT
    Transport proteins
    RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (bicarbonate-chloride-exchanging, AE2, modulator of; combination
        therapy to treat glaucoma by controlling secretion of excess
       fluids into aq. humor)
    Transport proteins
    RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (bicarbonate-chloride-exchanging, modulator of; combination therapy to
        treat glaucoma by controlling secretion of excess fluids into
```

aq. humor)

```
IT
     Transport proteins
     RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (chloride-potassium-sodium cotransporter, modulator of; combination
        therapy to treat glaucoma by controlling secretion of excess
        fluids into aq. humor)
IT
     Ion channel blockers
        (chloride; combination therapy to treat glaucoma by
        controlling secretion of excess fluids into aq. humor)
IT
     Eye
        (ciliary epithelium; combination therapy to treat glaucoma by
        controlling secretion of excess fluids into aq. humor)
IT
     Antiglaucoma agents
       Glaucoma (disease)
     Mouse
        (combination therapy to treat glaucoma by controlling
        secretion of excess fluids into aq. humor)
IT
     Biological transport
        (cotransport, modulator of; combination therapy to treat
        glaucoma by controlling secretion of excess fluids into aq.
        humor)
IT
     Gene, animal
     RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (for A3 adenosine receptor, lower intraocular pressure in mice lacking;
        combination therapy to treat glaucoma by controlling
        secretion of excess fluids into aq. humor)
IT
     Transport proteins
     RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (hydrogen ion-sodium-exchanging, NHE-1, modulator of; combination
        therapy to treat glaucoma by controlling secretion of excess
        fluids into aq. humor)
     Transport proteins
TT
     RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (hydrogen ion-sodium-exchanging, modulator of; combination therapy to
        treat glaucoma by controlling secretion of excess fluids into
        aq. humor)
IT
        (intraocular fluid; combination therapy to treat glaucoma by
        controlling secretion of excess fluids into aq. humor)
     Drug interactions
        (synergistic; combination therapy to treat glaucoma by
        controlling secretion of excess fluids into aq. humor)
     120279-96-1, Dorzolamide
     RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
     THU (Therapeutic use); BIOL (Biological study); USES (Uses)
        (carbonic anhydrase inhibitor; combination therapy to treat
        glaucoma by controlling secretion of excess fluids into aq.
        humor)
     53005-05-3, 4,4'-Diisothiocyanatostilbene-2,2'-disulfonic acid
     RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
     THU (Therapeutic use); BIOL (Biological study); USES (Uses)
        (chloride-bicarbonate-exchanger blocker; combination therapy to treat
        glaucoma by controlling secretion of excess fluids into aq.
        humor)
     28395-03-1, Bumetanide
    RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
     THU (Therapeutic use); BIOL (Biological study); USES (Uses)
        (chloride-potassium-sodium cotransporter blocker; combination therapy
        to treat glaucoma by controlling secretion of excess fluids
        into aq. humor)
IT
    2609-46-3, Amiloride
    RL: BSU (Biological study, unclassified); BIOL (Biological study)
        (combination therapy to treat glaucoma by controlling
        secretion of excess fluids into aq. humor)
    59-66-5, Acetazolamide
    RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
    THU (Therapeutic use); BIOL (Biological study); USES (Uses)
        (combination therapy to treat glaucoma by controlling
        secretion of excess fluids into aq. humor)
IT
     9001-03-0, Carbonic anhydrase
```

RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (inhibitor; combination therapy to treat glaucoma by
 controlling secretion of excess fluids into aq. humor)

1154-25-2 1214-79-5, Dimethylamiloride 517874-58-7, BIIB 723
RL: BSU (Biological study, unclassified); PAC (Pharmacological activity);
THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (sodium-hydrogen ion antiport blocker; combination therapy to treat
 glaucoma by controlling secretion of excess fluids into aq.
 humor)

L20 ANSWER 2 OF 10 USPATFULL DUPLICATE on STN2

ACCESSION NUMBER: 2003:3060 USPATFULL

TITLE: Anti-angiogenic compositions and methods of use

INVENTOR(S): Hunter, William L., Vancouver, CANADA
Machan, Lindsay S., Vancouver, CANADA
Arsenault, A. Larry, Paris, CANADA

NUMBER

KIND DATE

NUMBER DATE

PRIORITY INFORMATION: WO 1994-CA373 19940719

DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH

AVE, SUITE 6300, SEATTLE, WA, 98104-7092

NUMBER OF CLAIMS: 9 EXEMPLARY CLAIM: 1

IT

NUMBER OF DRAWINGS: 75 Drawing Page(s)

LINE COUNT: 5049

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase 11, casein kinase II); anti-depressants (e.g., .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular glaucoma, proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration.

diabetic retinopathy, retrolental fibroblasia and macular degeneration. DETD [0232] Within another aspect of the present invention, methods are

provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD [0233] Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .

DETD [0234] Neovascular glaucoma generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular. about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma,

carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular glaucoma. [0238] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular glaucoma. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,. . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . . the vessels and the retina This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this condition. L20 ANSWER 3 OF 10 USPATFULL on STN ACCESSION NUMBER: 2003:4168 USPATFULL Anti-angiogenic compositions and methods of use Hunter, William L., Vancouver, CANADA INVENTOR(S): Machan, Lindsay S., Vancouver, CANADA Arsenault, A. Larry, Paris, CANADA Angiotech Pharmaceuticals, Inc., Vancouver, BC, CANADA, PATENT ASSIGNEE(S): V6T 1Z4 (non-U.S. corporation) NUMBER KIND DATE ______ US 2003004209 A1 20030102 US 2002-112921 A1 20020328 (10) PATENT INFORMATION: APPLICATION INFO.: Continuation of Ser. No. US 1998-13765, filed on 27 Jan RELATED APPLN. INFO.: 1998, ABANDONED Continuation of Ser. No. US 1995-478914, filed on 7 Jun 1995, GRANTED, Pat. No. US 5994341 Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED Continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, ABANDONED NUMBER DATE PRIORITY INFORMATION: WO 1994-CA373 19940719 Utility DOCUMENT TYPE: FILE SEGMENT: APPLICATION LEGAL REPRESENTATIVE: SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH AVE, SUITE 6300, SEATTLE, WA, 98104-7092 NUMBER OF CLAIMS: 61 EXEMPLARY CLAIM: 1 NUMBER OF DRAWINGS: 76 Drawing Page(s) LINE COUNT: 5230 CAS INDEXING IS AVAILABLE FOR THIS PATENT. . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein

DETD

DETD

DETD

DETD

DETD

DETD

TITLE:

. . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular glaucoma, proliferative

kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase II,

casein kinase II); anti-depressants (e.g.. .

diabetic retinopathy, retrolental fibroblasia and macular degeneration. . . reduce inflammation resulting from the injection itself Within DETD another aspect of the present invention, methods are provided for treating neovascular glaucoma, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. [0194] Briefly, neovascular glaucoma is a pathological DETD condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. [0195] Neovascular glaucoma generally occurs as a complication DETD of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high

disorganized capillaries (which leak fluorescein) on the. . . DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular glaucoma.

DETD [0199] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally, . . .

magnification slitlamp biomicroscopy, where it reveals small, dilated,

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this condition.

L20 ANSWER 4 OF 10 USPATFULL

DUPLICATE on STN3

ACCESSION NUMBER: 2002:294335 USPATFULL

TITLE: ANTI-ANGIOGENIC COMPOSITIONS AND METHODS OF USE INVENTOR(S): HUNTER, WILLIAM L, BRITISH COLUMBIA, CANADA

MACHAN, LINDSAY S, BRITISH COLUMBIA, CANADA

ARSENAULT, A LARRY, ONTARIO, CANADA

RELATED APPLN. INFO.: Continuation of Ser. No. US 1995-480260, filed on 7 Jun 1995, ABANDONED Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED Division of Ser. No. US

1993-94536, filed on 19 Jul 1993, ABANDONED

NUMBER DATE

PRIORITY INFORMATION: WO 1994-CA373 19940719

DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH

AVE, SUITE 6300, SEATTLE, WA, 98104-7092

NUMBER OF CLAIMS: 61 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 82 Drawing Page(s)

LINE COUNT: 5243

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter

(e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2- transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride). calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase II, casein kinase II); anti-depressants (e.g.. . . . above, the present invention also provides methods for treating neovascular diseases of the eve, including for example, corneal neovascularization, neovascular glaucoma, proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration. [0233] Within another aspect of the present invention, methods are provided for treating neovascular glaucoma, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. [0234] Briefly, neovascular glaucoma is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates, from vessels. [0235] Neovascular glaucoma Generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma, stages, neovascular glaucoma may be diagnosed by high

DETD carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. .

. . anti-angiogenic composition, as described above) may be DETD administered topically to the eye in order to treat early forms of neovascular glaucoma.

[0239] Briefly, the pathology of diabetic retinopathy is thought to be DETD similar to that described above for neovascular glaucoma. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,.

. a decrease in peripheral vision of up to 50% of patients, DETD mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed.

. . . the vessels and the retina. This results in vitreous hemorrhage DETD and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this condition

L20 ANSWER 5 OF 10 USPATFULL on STN

ACCESSION NUMBER: 2002:295216 USPATFULL

ANTI-ANGIOGENIC COMPOSITIONS AND METHODS OF USE TITLE:

HUNTER, WILLIAM L., VANCOUVER, CANADA INVENTOR(S): MACHAN, LINDSAY S., VANCOUVER, CANADA ARSENAULT, A. LARRY, PARIS ON, CANADA

> NUMBER KIND DATE ______

PATENT INFORMATION: APPLICATION INFO.: RELATED APPLN. INFO.:

DETD

DETD

DETD

US 2002165265 A1 20021107 US 1997-984258 A1 19971203 (8)

Continuation of Ser. No. US 1995-478203, filed on 7 Jun 1995, GRANTED, Pat. No. US 5716981 Division of Ser. No.

US 1995-417160, filed on 3 Apr 1995, ABANDONED

Continuation-in-part of Ser. No. US 1993-94536, filed

on 19 Jul 1993, ABANDONED

NUMBER DATE

PRIORITY INFORMATION: DOCUMENT TYPE:

WO 1994-CA373 19940719

Utility APPLICATION FILE SEGMENT:

LEGAL REPRESENTATIVE: SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH

AVE, SUITE 6300, SEATTLE, WA, 98104-7092

NUMBER OF CLAIMS: 61 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 82 Drawing Page(s)

LINE COUNT: 5231

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine. serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+ transport such as L-type (e.g. diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein kinase C. myosin light chain kinase. Ca.sup.2+/calmodulin kinase II, casein kinase II); anti-depressants (e.g., . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration.

DETD [0194] Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD [0195] Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .

DETD [0196] Neovascular glaucoma generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia. intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular **glaucoma**.

DETD [0200] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally, . . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this condition

L20 ANSWER 6 OF 10 USPATFULL on STN

ACCESSION NUMBER: 2002:221067 USPATFULL

TITLE: Anti-angiogenic compositions and methods of use

INVENTOR(S):

Hunter, William L., Vancouver, CANADA
Machan, Lindsay S., Vancouver, CANADA
Arsenault, A. Larry, Paris, CANADA
Burt, Helen M., Vancouver, CANADA
Jackson, John K., Vancouver, CANADA
Dordunoo, Stephen K., Vancouver, CANADA

NUMBER KIND DATE

PATENT INFORMATION: US 2002119202 A1 20020829 APPLICATION INFO.: US 2001-927882 A1 20010809 (9)

RELATED APPLN. INFO.: Continuation of Ser. No. US 1999-294458, filed on 19

Apr 1999, PENDING Continuation of Ser. No. US

1995-480260, filed on 7 Jun 1995, ABANDONED Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, ABANDONED Division of Ser. No. US 1993-94536, filed on 19 Jul

1993, ABANDONED

NUMBER DATE

PRIORITY INFORMATION: WO 1994-CA373 19940719

DOCUMENT TYPE: Utility

FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: SEED INTELLECTUAL PROPERTY LAW GROUP PLLC, 701 FIFTH

AVE, SUITE 6300, SEATTLE, WA, 98104-7092

NUMBER OF CLAIMS: 11 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 75 Drawing Page(s)

LINE COUNT: 5037

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein

amiloride); ap-1 inhibitors (for tyrosine kinases, protein
kinase C, myosin light chain kinase, Ca.sup.2+/calmodulin kinase II,
casein kinase II); anti-depressants (e.g.. . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular glaucoma, proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration.

DETD [0197] Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD [0198] Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .

DETD [0199] Neovascular glaucoma generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular glaucoma.

DETD [0203] Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular **glaucoma**. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally, . . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this

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L20 ANSWER 7 OF 10 CAPLUS COPYRIGHT 2003 ACS on STN
ACCESSION NUMBER:
                        2000:814312 CAPLUS
DOCUMENT NUMBER:
                        133:344642
                        Methods using antiport modulators
TITLE:
                        for controlling intraocular pressure
INVENTOR (S):
                        Civan, Mortimer M.; MacKnight, Anthony D.
PATENT ASSIGNEE(S):
                        The Trustees of the University of Pennsylvania, USA
SOURCE:
                        PCT Int. Appl., 65 pp.
                        CODEN: PIXXD2
DOCUMENT TYPE:
                        Patent
LANGUAGE:
                        English
FAMILY ACC. NUM. COUNT:
PATENT INFORMATION:
     PATENT NO.
                    KIND DATE
                                         APPLICATION NO. DATE
     ______
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                     A1 20001116
                                         WO 2000-US12551 20000508
     WO 2000067756
         W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR,
             CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU,
             ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU,
             LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE,
             SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA,
             ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
         RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE,
             DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
             CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
PRIORITY APPLN. INFO.:
                                       US 1999-133180P P 19990507
REFERENCE COUNT:
                              THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS
                              RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
     Methods using antiport modulators for controlling
TI
     intraocular pressure
ST
     intraocular pressure glaucoma treatment antiport
    modulator; sodium proton exchanger modulation intraocular
     pressure; chloride bicarbonate exchanger modulation intraocular pressure
     Proteins, specific or class
IT
     RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
     (Biological study); PROC (Process)
        (AE2 antiport; antiport modulators for
        controlling intraocular pressure)
IT
    Adenosine receptors
     RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
     (Biological study); PROC (Process)
        (A3; antiport modulators for controlling
        intraocular pressure)
IT
     Proteins, specific or class
     RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
     (Biological study); PROC (Process)
        (NHE-1 antiport; antiport modulators for
        controlling intraocular pressure)
IT
    Antiglaucoma agents
    Secretion (process)
    pН
        (antiport modulators for controlling intraocular
       pressure)
IT
    Biological transport
        (antiport, chloride-bicarbonate; antiport
       modulators for controlling intraocular pressure)
IT
        (aq. humor; antiport modulators for controlling
       intraocular pressure)
IT
     Ion channel blockers
        (chloride; antiport modulators for controlling
        intraocular pressure)
IT
        (ciliary epithelium, nonpigmented; antiport
       modulators for controlling intraocular pressure)
IT
    Eye
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(ciliary epithelium, pigmented; antiport modulators
        for controlling intraocular pressure)
     Eye
        (ciliary epithelium; antiport modulators for
        controlling intraocular pressure)
     Drug delivery systems
        (ophthalmic; antiport modulators for controlling
        intraocular pressure)
     Biological transport
        (sodium-hydrogen antiport; antiport
       modulators for controlling intraocular pressure)
     Adrenoceptor antagonists
        (.beta.-; antiport modulators for controlling
        intraocular pressure)
     56-84-8, L-Aspartic acid, biological studies
                                                   59-66-5, Acetazolamide
     60-92-4, Cyclic AMP
                         28395-03-1, Bumetanide 53005-05-3, DIDS
     149725-40-6, HOE694 152918-18-8, IB-MECA
     RL: BAC (Biological activity or effector, except adverse); BSU (Biological
     study, unclassified); BIOL (Biological study)
        (antiport modulators for controlling intraocular
       pressure)
     100-88-9, Cyclamate 1154-25-2
                                    1214-79-5, Dimethylamiloride
     2609-46-3, Amiloride 2609-46-3D,
     Amiloride, analogs 26839-75-8, Timolol
     159138-80-4, Cariporide
     RL: BAC (Biological activity or effector, except adverse); BSU (Biological
     study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES
     (Uses)
        (antiport modulators for controlling intraocular
       pressure)
     71-52-3, Bicarbonate, biological studies 7440-09-7, Potassium,
     biological studies 7440-23-5, Sodium, biological studies
     Hydrogen ion, biological studies 16887-00-6, Chloride, biological
     studies
     RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL
     (Biological study); PROC (Process)
        (antiport modulators for controlling intraocular
       pressure)
L20 ANSWER 8 OF 10 USPATFULL on STN
                       1999:155724 USPATFULL
ACCESSION NUMBER:
                       Anti-angiogenic Compositions and methods for the
TITLE:
                       treatment of arthritis
INVENTOR(S):
                       Hunter, William L., Vancouver, Canada
                       Machan, Lindsay S., Vancouver, Canada
                       Arsenault, A. Larry, Paris, Canada
PATENT ASSIGNEE(S):
                       Angiogenesis Technologies, Inc., Vancouver, Canada
                       (non-U.S. corporation)
                           NUMBER
                                       KIND
                                                DATE
                       -------
PATENT INFORMATION:
                       US 5994341
                                              19991130
                                            19950607
                       US 1995-478914
APPLICATION INFO.:
                                                        (8)
                       Division of Ser. No. US 1995-417160, filed on 3 Apr
RELATED APPLN. INFO.:
                       1995, now abandoned which is a continuation-in-part of
                       Ser. No. US 1993-94536, filed on 19 Jul 1993, now
                       abandoned
                             NUMBER
                                          DATE
                       -----
PRIORITY INFORMATION:
                       WO 1994-CA373
                                        19940719
DOCUMENT TYPE:
                       Utility
FILE SEGMENT:
                       Granted
PRIMARY EXAMINER:
                       Kumar, Shailendra
LEGAL REPRESENTATIVE:
                       Seed & Berry LLP
NUMBER OF CLAIMS:
                       8
EXEMPLARY CLAIM:
```

129 Drawing Figure(s); 75 Drawing Page(s)

IT

IT

IT

IT

IT

IT

NUMBER OF DRAWINGS:

LINE COUNT:

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

. for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+ transport such as L-type (e.q., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+ /calmodulin kinase II, casein kinease II); anti-depressants.

. . above, the present invention also provides methods for treating DETD neovascular diseases of the eye, including for example, corneal neovascularization, neovascular glaucoma, proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration.

Within another aspect of the present invention, methods are provided for DETD treating neovascular glaucoma, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such.

Briefly, neovascular glaucoma is a pathological condition DETD wherein new capillaries develop in the iris of the eye. The angiogensis usually originates from vessels. . .

Neovascular glaucoma generally occurs as a complication of DETD diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the.

. . anti-angiogenic composition, as described above) may be DETD administered topically to the eye in order to treat early forms of neovascular glaucoma.

Briefly, the pathology of diabetic retinopathy is thought to be similar DETD to that described above for neovascular glaucoma. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally,.

. . a decrease in peripheral vision of up to 50% of patients, DETD mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed.

. . . the vessels and the retina. This results in vitreous hemorrhage DETD and/or retinal detachment which can lead to blindness. Neovascular angle-closure glaucoma is also a complication of this condition.

L20 ANSWER 9 OF 10 USPATFULL on STN

ACCESSION NUMBER: 1999:37140 USPATFULL

Anti-angiogenic compositions and methods of use TITLE:

INVENTOR (S): Hunter, William L., Vancouver, Canada Machan, Lindsay S., Vancouver, Canada Arsenault, A. Larry, Paris, Canada

PATENT ASSIGNEE(S): Angiotech Pharmaceuticals Inc., Vancouver, Canada

(non-U.S. corporation)

NUMBER KIND DATE -----

PATENT INFORMATION: APPLICATION INFO.: RELATED APPLN. INFO.: US 5886026 US 1995-472413 19990323 19950607 (8)

Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, now abandoned which is a continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, now abandoned

NUMBER DATE

PRIORITY INFORMATION: WO 1994-CA373 19940719

DOCUMENT TYPE: Utility FILE SEGMENT: Granted

PRIMARY EXAMINER: Kumar, Shailendra
LEGAL REPRESENTATIVE: Seed and Berry LLP

NUMBER OF CLAIMS: 6 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 130 Drawing Figure(s); 75 Drawing Page(s)

LINE COUNT: 4997

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . for example: .alpha.-adrenergic blocking agents, angiotensin II receptor antagonists and receptor antagonists for histamine, serotonin, endothelin; inhibitors of the sodium/hydrogen antiporter (e.g., amiloride and its derivatives); agents that modulate intracellular Ca.sup.2+ transport such as L-type (e.g., diltiazem, nifedipine, verapamil) or T-type Ca.sup.2+ channel blockers (e.g., amiloride), calmodulin antagonists (e.g., H.sub.7) and inhibitors of the sodium/calcium antiporter (e.g., amiloride); ap-1 inhibitors (for tyrosine kinases, protein kinase C, myosin light chain kinase, Ca.sup.2+ /calmodulin kinase II, casein kinase II); anti-depressants. . .

DETD . . . above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal neovascularization, neovascular **glaucoma**, proliferative diabetic retinopathy, retrolental fibroblasia and macular degeneration.

DETD Within another aspect of the present invention, methods are provided for treating neovascular **glaucoma**, comprising the step of administering to a patient a therapeutically effective amount of an anti-angiogenic composition to the eye, such. . .

DETD Briefly, neovascular **glaucoma** is a pathological condition wherein new capillaries develop in the iris of the eye. The angiogenesis usually originates from vessels. . .

DETD Neovascular glaucoma generally occurs as a complication of diseases in which retinal ischemia is predominant. In particular, about one third of the. . . with this disorder have diabetic retinopathy and 28% have central retinal vein occlusion. Other causes include chronic retinal detachment, end-stage glaucoma, carotid artery obstructive disease, retrolental fibroplasia, sickle-cell anemia, intraocular tumors, and carotid cavernous fistulas. In its early stages, neovascular glaucoma may be diagnosed by high magnification slitlamp biomicroscopy, where it reveals small, dilated, disorganized capillaries (which leak fluorescein) on the. . .

DETD . . . anti-angiogenic composition, as described above) may be administered topically to the eye in order to treat early forms of neovascular glaucoma.

DETD Briefly, the pathology of diabetic retinopathy is thought to be similar to that described above for neovascular glaucoma. In particular, background diabetic retinopathy is believed to convert to proliferative diabetic retinopathy under the influence of retinal hypoxia. Generally, . . .

DETD . . . a decrease in peripheral vision of up to 50% of patients, mechanical abrasions of the cornea, laser-induced cataract formation, acute glaucoma, and stimulation of subretinal neovascular growth (which can result in loss of vision). As a result, this procedure is performed. . .

DETD . . . the vessels and the retina. This results in vitreous hemorrhage and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

L20 ANSWER 10 OF 10 USPATFULL on STN

ACCESSION NUMBER: 1998:14828 USPATFULL

TITLE: Anti-angiogenic compositions and methods of use

INVENTOR(S): Hunter, William L., Vancouver, Canada Machan, Lindsay S., Vancouver, Canada Arsenault, A. Larry, Paris, Canada

PATENT ASSIGNEE(S): Angiogenesis Technologies, Inc., Vancouver, Canada

•		, and the second			
		NUMBER KIND DATE			
APPLIC	I INFORMATION: CATION INFO.: ED APPLN. INFO.:	US 5716981 19980210 US 1995-478203 19950607 (8) Division of Ser. No. US 1995-417160, filed on 3 Apr 1995, now abandoned which is a continuation-in-part of Ser. No. US 1993-94536, filed on 19 Jul 1993, now abandoned			
		NUMBER DATE			
DOCUME FILE S PRIMAF LEGAL NUMBEF EXEMPI NUMBEF LINE O	REPRESENTATIVE: R OF CLAIMS: LARY CLAIM: R OF DRAWINGS: COUNT:	WO 1994-CA373 19940719 Utility Granted Kumar, Shailendra Seed and Berry LLP 18 1 130 Drawing Figure(s); 75 Drawing Page(s) 5084			
			T		
DETD	receptor antagon endothelin; inhi (e.g., amiloride modulate intrace (e.g., diltiazem blockers (e.g., H.sub.7) and inh (e.g., amiloride protein kinase C	ample: .alphaadrenergic blocking agents, angiotensin II hists and receptor antagonists for histamine, serotonin, hibitors of the sodium/hydrogen antiporter a and its derivatives); agents that hellular Ca.sup.2+ transport such as L-type h, nifedipine, verapamil) or T-type Ca.sup.2+ channel amiloride), calmodulin antagonists (e.g., hibitors of the sodium/calcium antiporter he); ap-1 inhibitors (for tyrosine kinases, hibitors light chain kinase, Ca.sup.2+ /calmodulin			
		in kinase II); anti-depressants			
DETD	D above, the present invention also provides methods for treating neovascular diseases of the eye, including for example, corneal				
	neovascularizati	ion, neovascular glaucoma , proliferative			
DETD	diabetic retinopathy, retrolental fibroblasia and macular degeneration. Within another aspect of the present invention, methods are provided for				
2212	treating neovascular glaucoma, comprising the step of				
	administering to	o a patient a therapeutically effective amount of an			
DETD	anti-angiogenic composition to the eye, such Briefly, neovascular glaucoma is a pathological condition				
		illaries develop in the iris of the eye. The angiogenesis	s		
DETD		ces from vessels coma generally occurs as a complication of			
		ch retinal ischemia is predominant. In particular, about			
		e with this disorder have diabetic retinopathy ntral retinal vein occlusion. Other causes include			
	chronic retinal	detachment, end-stage glaucoma, carotid artery			
		ease, retrolental fibroplasia, sickle-cell anemia, ors, and carotid cavernous fistulas. In its early stages,			
		coma may be diagnosed by high magnification	,		
		roscopy, where it reveals small, dilated, disorganized			
DETD		ich leak fluorescein) on the ngiogenic composition, as described above) may be			
	administered top	pically to the eye in order to treat early forms of			
DETD	neovascular glau Briefly, the pat	<pre>icoma. thology of diabetic retinopathy is thought to be similar</pre>			
	to that describe	ed above for neovascular glaucoma . In			
		rground diabetic retinopathy is believed to convert to labetic retinopathy under the influence of retinal			
	hypoxia. General				
DETD	a decre	ease in peripheral vision of up to 50% of patients,			
		sions of the cornea, laser-induced cataract formation, and stimulation of subretinal neovascular			
	growth (which ca	an result in loss of vision). As a result, this procedure	3		
DEMP	is performed		_		
DETD	the ves	ssels and the retina. This results in vitreous hemorrhage	=		

and/or retinal detachment which can lead to blindness. Neovascular angle-closure **glaucoma** is also a complication of this condition.

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75% OF LIMIT FOR L#S REACHED

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(FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)
     FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003
              1 S TIMOLOL/CN
L1
              1 S AMILORIDE/CN
L2
              0 S ETHYL ISOPROPYL AMILORIDE
L3
              0 S ISOPROPYL ETHYL AMILORIDE
L4
            131 S AMILORIDE
L5
              4 S ETHYL AMILORIDE
L6
L7
              1 S CARIPORIDE/CN
     FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN,
     DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE,
     ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE,
     NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ... 'ENTERED AT 18:33:21 ON
     27 JUL 2003
          31558 S L1 OR TIMOLOL
L8
L9
          64288 S L2 OR AMILORIDE
            507 S L7 OR ACRIPORIDE
L10
           1505 S L7 OR CARIPORIDE
L11
          95722 S L8 OR L9 OR L11
L12
         159500 S GLAUCOMA
L13
         34931 S AQUEOUS HUMOR
L14
              0 S S ANTIPORT (S) MODULAT?
L15
            457 S ANTIPORT (S) MODULAT?
L16
            923 S ANTIPORT? (S) MODULAT?
L17
           9965 S L12 AND L13
L18
             13 S L18 AND L17
L19
L20
             10 DUP REM L19 (3 DUPLICATES REMOVED)
=> s intraocular pressure
 29 FILES SEARCHED...
         82563 INTRAOCULAR PRESSURE
=> s 118 and 121
         5371 L18 AND L21
L22
=> s 114 and 122
          730 L14 AND L22
L23
=> s sodium proton (s) exchange
 33 FILES SEARCHED...
          3138 SODIUM PROTON (S) EXCHANGE
=> s 124 and 123
             0 L24 AND L23
L25
=> s ae-2 antiport
 21 FILES SEARCHED...
1,26
             0 AE-2 ANTIPORT
=> s nhe-1 antiport
 26 FILES SEARCHED...
             3 NHE-1 ANTIPORT
L27
=> s nhe antiport
L28
             3 NHE ANTIPORT
=> s nhe (s) antiport
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=> s ae2 (s) antiport

30 AE2 (S) ANTIPORT

=> s 129 and 130

4 L29 AND L30

=> s 131 and 123

1 L31 AND L23

=> s 129 or 130

232 L29 OR L30

=> s 123 and 133

1 L23 AND L33

=> d 134 ibib, kwic

PATENT INFORMATION:

L34 ANSWER 1 OF 1 USPATFULL on STN

ACCESSION NUMBER: 2003:120743 USPATFULL

TITLE: Novel combination therapy to treat glaucoma

INVENTOR (S): Civan, Mortimer M., Wynnewood, PA, UNITED STATES

Jacobson, Kenneth A., Silver Spring, MD, UNITED STATES

MacKnight, Anthony D.C., Dunedin, NEW ZEALAND

Mitchell, Claire H., Philadelphia, PA, UNITED STATES

Stone, Richard A., Havertown, PA, UNITED STATES

KIND NUMBER DATE -----US 2003083227 A1 20030501 US 2002-217755 A1 20020813

APPLICATION INFO.: 20020813 (10)

RELATED APPLN. INFO.: Continuation-in-part of Ser. No. US 2002-9581, filed on

30 Apr 2002, PENDING

NUMBER DATE -----

PRIORITY INFORMATION: US 1999-133180P 19990507 (60)

US 2001-312036P 20010813 (60)

DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: Evelyn H. McConathy, Esquire, Dilworth Paxson LLP, 3200

Mellon Bank Center, 1735 Market Street, Philadelphia,

PA, 19103

NUMBER OF CLAIMS: 31 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 6 Drawing Page(s)

LINE COUNT: 1250

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

Novel combination therapy to treat glaucoma

AB Provided is a method for modulating, controlling or regulating

intraocular pressure and secretion of the

aqueous humor of the eye, in particular for treating

or reducing elevated intraocular pressure or

secretion, e.g., related to glaucomas. Selected combined drug therapy

effectively and synergistically modulates intraocular

pressure by either (1) double-blocking the uptake step, wherein

both transporters in the first (entry step) of aqueous

humor formation are blocked or inhibited; or (2) blocking the entry and exit steps, wherein the sodium-hydrogen (Na.sup.+/H.sup.+)

exchanger underlying the. . . inhibited, and also lowering or

reducing the activity of the chloride (Cl.sup.-) channels involved in the second (exit) step of aqueous humor formation.

By combining the selected drugs or compounds to produce a combined or

synergistic modulating effect, control of IOP is.

. . . The present invention relates to the field of ophthalmology. In particular, the invention relates to the prevention and treatment of glaucoma and associated elevations of intraocular

SUMM

pressure. the world, currently affecting an estimated three million SUMM people in the United States, with 300,000 new cases diagnosed every year. Glaucoma results from obstructed outflow from the aqueous humor of the eye, resulting in elevated intraocular pressure in the anterior chamber, and visual loss attributed to progressive damage of the optic nerve, and consequent loss of retinal ganglion cells (Quigley et al., Invest. Ophthalmol. Vis. Sci. 19:505 (1980)). Increase of the intraocular pressure ("IOP") of the eye is the major, and best understood, risk factor for the appearance and progression of glaucomatous optic neuropathy. Elevated or increased intraocular pressure ("IOP") can also be caused by other conditions, such as impaired intraocular fluid transport caused by eye surgery, including surgery for glaucoma. The IOP, itself, reflects a balance between the rates of inflow (fluid formation) and outflow (fluid return) of the aqueous humor by re-absorption. Medical approaches to treating glaucoma are frequently directed at reducing the rate of net formation of aqueous humor. [0005] The aqueous humor of the eye is formed by the SUMM

reducing the rate of net formation of aqueous humor.

[0005] The aqueous humor of the eye is formed by the ciliary epithelium, comprising two cell layers, whose apical membranes are juxtaposed. The outer. . . ciliary epithelial (PE) cells face the stroma, while the inner non-pigmented ciliary epithelial (NPE) cells are in contact with the aqueous humor. Secretion involves primary solute transfer, primarily NaCl, with accompanying water movement, from the blood or supporting stroma, across the basolateral membranes of the PE cells into the aqueous humor in the contralateral posterior chamber of the eye (Cole, Exp. Eye Res. 25(Suppl):161-176 (1977)). This provides an osmotic driving force. . .

SUMM [0006] The secretion of aqueous humor into the eye results as a consequence of two opposing physiological processes: fluid secretion into the eye by the NPE. . . of the eye) by the PE cells. Thus, both release of chloride ions by the NPE cells into the adjacent aqueous humor enhance secretion, and chloride ion release by the PE cells into the neighboring stroma reduce net secretion (Civan, Current Topics. . . Membranes 45:1-24 (1998), Tripathi, In: The Eye, Chap. 3, pp 163-356, Davson & Graham (eds), Academic Press, New York, (1974)). Intraocular pressure reflects a balance between the rates of secretion and outflow of the aqueous humor.

SUMM . . . factor governing the rate of secretion is the rate of chloride ion (Cl.sup.-) release from the NPE cells into the aqueous humor (Civan, News Physiol. Sci. 12:158-162 (1997)). Thus, the activity of the Cl.sup.- channels is a rate-limiting factor in aqueous humor secretion, given the low baseline level of channel activity and the predominance of the chloride anion in the transferred fluid. . .

SUMM [0008] Structurally the mouse eye parallels the aqueous humor outflow pathways in the human and shows similar functional responses to drugs that inhibit aqueous humor inflow and facilitate outflow in the human. Thus, the mouse is a particularly suitable non-primate model for studying the genetic. . . control of physiological and pharmacological function. However, the anterior chamber of a mouse eye contains only about 2-4 .mu.l of aqueous humor, which until recently, complicated efforts to measure IOP in the mouse reliably.

SUMM [0010] FIG. 1 depicts a minimalist, and necessarily incomplete, consensus model of aqueous humor secretion from Avila et al., Invest. Ophthalmol. Vis. Sci. 43:1897-1902 (2002) (Carre et al., Curr. Eye Res. 11:609-624 (1992); Chu. . . et al., Exp. Eye. Res. 64:945-952 (1997)). "Inflow," the transfer of fluid from body side or "stromal side" into the aqueous humor, is presented as basically a 3-step process. First, as shown, water and salt, NaCl, is initially taken up from the. . .

SUMM

. . . the PE cells diffuses across the gap junctions into the second cell layer [non-pigmented ciliary epithelial (NPE) cells] abutting the aqueous humor (Coca-Prados et al., Curr. Eye Res. 11:113-122 (1992); Edelman et al., 1994; Mitchell et al., FASEB J

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Vis. Sci. 17:958-981 (1978); Walker et al., 1999; Wolosin et al., In:
       The Eye's Aqueous Humor: From Secretion to
       Glaucoma, Civan (ed), Academic Press, Boston, pp 135-162
       (1998)).
SUMM
       [0012] Finally, the salts and fluids are released into the
       aqueous humor by the contiquous NPE cells through the
       Na.sup.+, K.sup.+-activated ATPase exchange pump and Cl.sup.- channels
       (Jacob et al., Am. J..
       [0014] Current treatment methods to relieve intraocular
SUMM
       pressure include forming small laser penetrations in the eye to
       release excess pressure (e.g., trabeculectomy), as well as the use of
       systemic and topical drugs for lowering intraocular
       pressure. At the present time, medical control of
       intraocular pressure and glaucoma consists
       of topical, oral or intravitreous administration of many compounds. See
       generally, Horlington, U.S. Pat. No. 4,425,346; Komuro et al.,.
       [0015] Among the most effective medical therapies for glaucoma
SUMM
       are strategies aimed at reducing intraocular pressure
       by reducing the net rate of aqueous humor formation
       by the ocular ciliary epithelial bilayer (see generally, Shields,
       Textbook of Glaucoma, 3rd Ed., Williams & Wilkins, Baltimore
       (1992)). This can occur either by blocking unidirectional secretion from
       stroma to the aqueous humor or by stimulating flow
       in the opposite direction (Caprioli et al., Yale J. Biol. Med.
       57:283-300 (1984); Civan et al.,.
       [0016] Four primary classes of drugs are used to treat glaucoma
SUMM
       . These include: miotics (e.g., pilocarpine, carbachol and
       acetylcholinesterase inhibitors); sympathomimetics (e.g., epinephrine,
       metipranolol, dipivefrin, carbachol, dipivalyl, and parn-
       aminoclonidine); beta-blockers (e.g., betaxolol, levobunolol and
       timolol) and potent cholinesterase inhibitors (e.g.,
       echothiophate); and carbonic anhydrase inhibitors (e.g., acetazolamide,
       methazolamide, dorzolamidet and ethoxzolamide). For example, miotics and
       sympathomimetics are believed to lower intraocular
       pressure by increasing the outflow of aqueous
       humor, while beta-blockers and carbonic anhydrase inhibitors are
       believed to operate by decreasing the formation of aqueous
       humor (Ritch et al., (1996) In: The Glaucomas (eds Ritch,
       Shields, Krupin) 2nd ed., pp. 1507-1519, Mosby, St. Louis). The
       non-selective, . . . topical, .beta.- and .beta..sub.1-adrenergic
       antagonists have proven to be useful for lowering the secretory rate of
       fluids in the eye (aqueous humor inflow), and
       thereby for controlling intraocular pressure (Gieser
       et al., (1996) In: The Glaucomas, supra, pp. 1425-1448). Timolol
       reportedly binds to .beta.-adrenergic receptors of the ciliary processes
       with high affinity (Vareilles et al., Invest. Ophthalmol. Vis. Sci.
       16:987-996 (1977)), and is among the most widely used and effective
       drugs for lowering the intraocular pressure of
       glaucomatous patients (Gieser et al., 1996). Another new type of drug,
       precursor prostaglandin compounds (e.g., latanoprost), which enhance
       outflow.
                Miotics tend to reduce the patient's visual acuity,
SUMM
       particularly in the presence of lenticular opacities. Topical beta
       blockers, such as timolol, have been associated with
       side-effects such as fatigue, confusion, or asthma; while exacerbated
       cardiac symptoms have been reported after rapid.
       [0018] Accordingly, because of the insidious nature of glaucomas and
SUMM
       other conditions affecting the intraocular pressure
       in the eye and the difficulties in treating them, there has been an
       on-going and long-felt need in the art for the development of methods
       for the safe and reliable prevention, control or treatment of elevated
       intraocular pressure, that can be utilized before
       significant damage to the optical nerve occurs. Also needed is the
       discovery of compositions or.
       [0019] Lower than normal intraocular pressure can
SUMM
       also be problematic, caused for example, by a variety of conditions,
       such as surgery for glaucoma, retinal detachment, uveitis, and
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the like. However, since no drugs are presently available for the safe

(1994); Raviola et al., Invest. Ophthalmol.

11:A301 (1998); Oh.

and effective prevention, modulation or regulation of reduced intraocular pressure without adverse side-effects, there remains a need for the development of more effective treatment methods for surgically-induced low or depressed intraocular pressure, as well as elevated intraocular pressure. [0020] The present invention, therefore, meets a particular need in the art by providing methods for preventing, modulating or regulating intraocular pressure, in particular for treating or reducing elevated intraocular pressure. Specifically, the present invention provides combined therapeutic methods by which intraocular fluid pressure can be selectively and reversably increased, decreased, . . . level, although primarily the invention will be useful to relieve or prevent elevated levels of intraocular fluid in, for example, glaucoma patients, before vision is adversely and permanently affected. In addition, the present combined therapeutic methods permit known compounds to be. [0021] The present invention provides several methods for regulating, controlling or modulating aqueous humor secretion, comprising the step of administering to ciliary epithelial cells of the aqueous humor, an effective ("secretion-modulating") amount of more than one pharmaceutical compositions administered in combination (or sequentially, but in sufficiently close proximity. combined effect). Further provided is in vivo evidence that the combinations of drugs or therapeutic moieties effectively and synergistically lower intraocular pressure (IOP) by: (1) double-blocking the uptake step, wherein both transporters in the first (entry step) of aqueous humor formation (the paired Na.sup.+/H.sup.+ and Cl.sup.-/HCO.sub.3.sup.- antiports and the Na.sup.+-K.sup.+-2Cl.sup.- symport) are blocked or inhibited; or (2) blocking or inhibiting. . . and also the activity is lowered or reduced of the chloride (Cl.sup.-) channels involved in the second (exit) step of aqueous humor formation. in the patient, thereby modulating, preferably by blocking or inhibiting elevated IOP. In fact, when either the secretion into the aqueous humor cells is elevated, or the fluid pressure or intraocular pressure is elevated in a patient, the drugs in the combination therapy are administered in a combined amount, that is sufficient. to the cells in vitro or in vivo. The latter methods offer regulation, control or modulation of fluid pressure or intraocular pressure in an individual or subject. [0026] FIG. 1 depicts a consensus model of aqueous humor formation and NaCl secretion by the ciliary epithelium. Carbonic anhydrase limited delivery of H.sup.+ and HCO.sub.3.sup.-. . through the Na.sup.+-K.sup.+-2Cl.sup.limits uptake of stromal. symport. At the contralateral surface, Na+ and Cl.sup.- can be released from the NPE cells into the aqueous humor through Na.sup.+, K.sup.+-activated ATPase and Cl.sup.- channels, respectively. [0031] The methods and compositions of the present invention are intended for treatment of glaucoma and other conditions, which manifest elevated intraocular pressure in the eye of a patient, particularly human patients, but also including other mammalian hosts. Glaucoma is a term which embraces a group of ocular diseases characterized by elevated intraocular pressure levels which can damage the eye, and destroy the optic nerve and related ganglia. In addition, normotensive glaucoma is characterized by an apparent nonelevated intraocular pressure. However, for the patient suffering from normotensive glaucoma, the apparently normal pressure is sufficiently high for that particular patient as to cause the same types of nerve and. [0032] Therefore, the glaucomas treated by the methods of the present

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DETD

DETD [0032] Therefore, the glaucomas treated by the methods of the present invention are not limited exclusively to elevated intraocular pressure. Other conditions which result in elevated intraocular pressure levels include cataract surgery, steroid treatment, and treatment with other drugs known to cause intraocular pressure. The methods and compositions of the present invention are intended to treat all such conditions,

preferably to lower the intraocular pressure to a manageable and safe level. Moreover, the methods are also effective in the treatment of lower than normal intraocular pressure levels.

DETD . . . present invention provides in vivo evidence that combinations of drugs or therapeutic moieties (the "combined modulator") effectively and synergistically lower intraocular pressure (IOP) by either: (1) double-blocking of uptake step, wherein both transporters in the first (entry step) of aqueous humor formation are blocked or inhibited; or (2) blocking of the entry and exit steps, wherein the sodium-hydrogen (Na.sup.+/H.sup.+) exchanger underlying. . . and also the activity is lowered or reduced of the chloride (Cl.sup.-) channels involved in the second (exit) step of aqueous humor formation. These discoveries, which are discussed in detail below, permit strategies to be developed to use drugs at very low, focussed concentrations for preventing, modulating or regulating intraocular pressure, most particularly for treating or reducing elevated intraocular pressure

[0038] The basis for the first step in inflow into the aqueous humor, uptake of salt into the PE-cell layer, has been the subject of considerable controversy. Some investigators have reported that the. . .

DETD

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. . . in vitro (in cultured bovine PE cells and RNA preparations of human ciliary body) the molecular basis for the paired antiport activity of the NHE-1 Na.sup.+/H.sup.+ exchanger, and the AE2 Cl.sup.-/HCO.sub.3.sup.- exchanger. (Counillon et al., Pflugers Arch. (Eur. J. Physiol.) 440:667-678 (2000); Avila et al., 2001A). Because the NHE-1 exchanger is highly sensitive to several blockers of the sodium/proton symport, it was possible to selectively block the exchangers specifically involved in aqueous humor inflow.

. . . antiports provide the dominant entry pathway under physiological conditions, and further suggested that carbonic anhydrase inhibitors (commonly used to treat **glaucoma**) act by blocking Na.sup.+/H.sup.+ exchange. More recently an electron-probe X-ray microanalysis (McLaughlin et al., Am. J. Physiol. Cell Physiol. 281:C865-C875(2001)) further suggested that another very widely used antiglaucomatous drug (timolol) acts primarily in the same way, blocking Na.sup.+/H.sup.+ exchange.

. . . Ophthamol. Vis. Sci. 38:1700-1707 (1997). However, in a preferred and exemplified embodiment of the invention, after applying a topical inhibitor (ethylisopropyl-amiloride) of Na.sup.+/H.sup.+ antiport exchange, the administration of 10 mM bumetanide reduced IOP by 4.0.+-.0.6 mm Hg (mean.+-.SE, N=6, P<0.01). By. . .

[0043] The basis of the release step of solute and water into aqueous humor is generally via extrusion of Na.sup.+ through the Na.sup.+, K.sup.+-activated ATPase and the release of Cl.sup.- through the Cl.sup.- channels. Agonists of A.sub.3-subtype adenosine receptors have been found to activate the Cl.sup.- channels of NPE cells. This action enhances aqueous humor inflow and raises IOP.

DETD . the present invention provides an alternative combinatorial drug approach for more effectively controlling IOP, wherein both the first step of aqueous humor formation (entry into the ciliary epithelium) and the release step of the chloride ions from the aqueous humor are simultaneously blocked. The advantage of this approach is that each of the two steps can be selectively targeted, thereby. . . two entry steps were blocked, the NHE-1 exchanger can be selectively blocked, which is important in the first step of aqueous humor formation. However, it is also possible to block activation of the final step of aqueous humor formation by applying A.sub.3-subtype adenosine-receptor antagonists. Therefore, by administering both classes of drugs together, the effect is highly advantageous (blocking or controlling both the first and the final steps of aqueous humor formation), resulting in an efficacious mechanism for modulating IOP that is also relatively free of side effects.

. and it is desirable that such elevated pressures be lowered to DETD below 18 mm Hq. In the case of low-tension glaucoma, it is desirable for the intraocular pressure to be lowered below that exhibited by the patient prior to treatment. Intraocular pressure can be measured by conventional tonometric techniques. [0047] The methods and compositions of the present invention are also DETD intended for treatment of hypotonia and/or reduced intraocular pressure conditions of the eye. Reduced intraocular pressures are generally considered below about 8 mm Hg. Such conditions may result from a variety of causes, such as surgery for glaucoma, retinal detachment, uveitis, and the like. [0048] The exemplified inhibitors described in detail in the Examples DETD include cariporide, EIPA (ethylisopropylamiloride), DMA (dimethylamiloride) and amiloride, at concentrations characteristic of the NHE-1 isoform. Nevertheless, applicable compounds would include any of the beta blockers (including topical, .beta.- and .beta..sub.1-adrenergic antagonists, such as timolol), or amiloride analogs, as well as, but not limited to, the many compounds produced by Hoechst, i.e., cariporide, as well as other compounds that would be recognized as modulators of Na.sup.+ uptake or the anion exchange system. See,. [0049] In the present invention, a pharmaceutical composition which upon DETD administration increases or decreases secretion of fluids into the aqueous humor as compared to the level prior to administration, is termed a "secretion modulator;" and the amount of the modulator necessary. . . is termed the "secretion modulating amount." Similarly, a pharmaceutical composition which upon administration increases or decreases fluid pressure in the aqueous humor or intraocular pressure, as compared to the level prior to administration, is termed a "pressure modulator;" and the amount of the modulator necessary. DETD . . composition, which can include drugs, compounds, pharmaceuticals or the like, can be used to treat an individual, such as a glaucoma patient. [0052] Potential physiologic implications. The NHE-1 isoform DETD of the Na.sup.+/H.sup.+ exchangers is ubiquitously expressed in all eukaryotic cells (Counillon et al., J. Biol Chem 275:1-4 (2000). solute and fluid by the PE cells (the post-RVD RVI). This fluid uptake can be inhibited by blocking the Na.sup.+/H.sup.+ antiport with dimethylamiloride or by blocking Cl.sup.-/HCO.sub.3.sup.- exchange by omitting CO.sub.2/HCO.sub.3.sup.-. When the Na.sup.+-K.sup.+-2Cl.sup.symport is blocked with bumetanide, the further addition of DIDS also blocks the post-RVD RVI. Thus, the paired exchange of NHE-1 and AE2 can lead to net fluid uptake from the extracellular compartment into the PE cells, as demonstrated in other systems (Jiang. and Cl.sup.-/HCO.sub.3.sup.- antiports) and the effect of DETD blocking both, also explains the clinical efficacy of carbonic anhydrase inhibitors in treating glaucoma. Reducing the availability of H.sup.+ and HCO.sub.3.sup.- to both antiports, thereby synergistically inhibits the initial step in aqueous humor secretion. The current data suggest that this step could be selectively blocked in glaucomatous patients by specifically inhibiting NHE-1 with low concentrations of EIPA, DMA or cariporide, particularly in combination with bumetanide to simultaneously block the symport. DETD A therapeutically effective amount of the combined agent is that amount necessary to significantly reduce or eliminate symptoms associated with glaucoma, particularly to reduce or prevent elevated IOP more effectively that the effect of one of the compositions alone would have.. DETD The Control of Sodium/Proton Exchangers to Control the Secretion of Excess Fluids into the Aqueous Humor DETD . However, first it was necessary to confirm that the paired antiports are the dominant mechanism in the first step of aqueous humor formation. Consequently, one or the other antiport was blocked to measure whether inflow, and therefore IOP, are reduced by the. DETD [0076] After entry of the tip into the anterior chamber, the step change

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the micropipette, displacing the low-resistance 3-M KCl filling solution
       from the tip back toward the shank. The resultant increase.
       electrical resistance generated a signal to a vacuum-pressure pump that
       produced an equal counter-pressure that maintained the position of the
       aqueous humor-KCl interface at the tip of the
       micropipette, and thus sustains the original electrical resistance. This
       counter-pressure equaled the hydrostatic pressure.
          . . Fishers, N.Y.) and a piezoelectric step driver (model PZ100;
DETD
       Burleigh). IOP was monitored after positioning the micropipette tip in
       the aqueous humor. The baseline IOP in the present
       study was 14.2.+-.0.4 mm Hg (n=113). In measuring drug-induced changes
       in IOP, each animal.
       [0084] Among the drugs administered were the selective Na.sup.+/H.sup.+
DETD
       antiport inhibitors (direct inhibitors), dimethylamiloride (DMA)
       and ethylisopropylamiloride (EIPA) (Sigma Chemical Co). A third such
       inhibitor also used was BIIB723 (Boehringer/Ingelheim, Biberach an der
       Riss, Germany), which is a member of the BIIB family of Na.sup.+/H.sup.+
       antiport blockers. Similar to nearly all other NHE-1
       inhibitors, BIIB723 is an acylguanidine, displaying a selectivity for
       NHE-1 over NHE-2 of approximately 40-fold and an
       IC.sub.50 of approximately 30 nM in cardiomyocytes and approximately 100
       nM in hamster fibroblasts. The parent compound (amiloride;
       Merck, Rahway, N.J.) of the amiloride analogues DMA and EIPA
       is a low-potency inhibitor of both Na.sup.+/H.sup.+ and
       Na.sup.+/Ca.sup.2+ antiports and a higher-potency blocker of ENaC. . .
DETD
       [0087] DMA, an amiloride analogue with a highly selective
       inhibitory effect on the NHE-1 antiport (Counillon
       et al., Mol. Pharmacol. 44:1041-1045 (1993)) produced a
       concentration-dependent lowering of IOP (FIG. 3, Table 1). Although the
       precise.
DETD
       [0088] Another amiloride analogue, EIPA, displayed the same
       minimally effective droplet concentration and enhanced lowering of IOP
       at 3 mM (300 ng; by 4.1.+-.1.0 mm Hg, Table 1). A third acylguanidine
       antiport inhibitor, BIIB723, produced a maximal hypotensive
       effect at 3 mM (16.0 .mu.g) of 4.9.+-.1.7 mm Hg, similar to that of.
         .mu.g; -4.5.+-.0.5 mm Hg) and 3 mM (16.0 .mu.g; -4.9.+-.1.7 mm Hg)
       and the similar reductions produced by all three NHE-1
       inhibitors tested at 3 mM indicated that a maximal IOP reduction was
       achieved of 4.1 to 5.0 mm Hg. The.
TABLE 1
Single-Drug Effects of DMA, EIPA, Bumetanide, BIIB723, and Dorzolamide
on IOP.
                                                                  .DELTA.IOP (mm
Drug
                                            Conc.
                Class
                                       n
                                                        Dose
       Hg) P
DMA
               Na/H antiport inhibitor 3
                                             100 .mu.M
                                                          294 ng
       +0.9 .+-. 0.9
                                                        2.94 .mu.g -3.8 .+-.
                                       23
                                             1 mM
       0.5
            <0.001
                                                        8.82 .mu.g -5.0 .+-.
                                             3 mM
       0.7
             <0.01
EIPA
               Na/H antiport inhibitor 3
                                             100 .mu.M
                                                          300 ng
       +0.8 .+-. 0.2
                                       10
                                             1 mM
                                                        3.00 .mu.g -2.6 .+-.
      0.5
            <0.001
                                       6
                                             3 mM
                                                        9.00 .mu.g -4.1 .+-.
       1.0
             <0.01
BIIB
               Na/H antiport inhibitor 3
                                              10 .mu.M
                                                         53.4 ng
       -0.4 .+-. 1.9
                                       4
                                            100 .mu.M
                                                         534 ng -2.7 .+-. 0.4
       <0.01
                                       17
                                             1.
DETD
              of 1 mM for DMA and EIPA (Table 1) appears to correspond to
      approximately 1 to 10 .mu.M in the aqueous humor,
      and the minimally effective droplet concentration of 100 .mu.M for
      BIIB723 corresponded to aqueous humor concentrations
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in hydrostatic pressure forced aqueous humor into

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of .about.0.1 to 1 .mu.M. The differences may arise from a higher
       penetrance for BIIB723, because the IC.sub.50 observed.
            . that topical application of dorzolamide also reduces IOP,
DETD
       albeit to a lesser extent at the droplet concentrations applied (Table
       1). Amiloride, which inhibits NHE-1 antiports at a potency 1
       to 2 orders of magnitude lower than the amiloride analogues
       DMA and EIPA (Counillon et al., 2000), itself exerted no significant
       effect on mouse IOP at a droplet concentration. . . of 1 mM (2.30
       .mu.g, n=7, data not shown). To reach a 10-mM concentration, it was
       necessary to solubilize the amiloride in 30% DMSO. After
       pretreatment with vehicle containing 30% DMSO, subsequent application of
       10 mM amiloride in the same concentration of vehicle did not
       alter that IOP (.DELTA.IOP=1.0.+-.0.7 mm Hg, n=4, P>0.2). Thus, at a
       concentration 10 times higher than EIPA's minimal effective
       concentration, amiloride had no effect, consistent with the
       known ratio of the potency of these inhibitors (3.9:0.07 .mu.M, or
       .about.56) when applied.
       [0091] In contrast to the IOP reductions triggered by the three
DETD
       selective inhibitors of the NHE-1 antiport at
       droplet concentrations of 0.1 to 3 mM (Table 1), blockage of the
       Na.sup.+-K.sup.+-2Cl.sup.- symport with droplet concentrations of 0.1.
DETD
       [0095] In sum, these salient findings demonstrate that inhibitors of the
      NHE-1 Na.sup.+/H.sup.+ antiport reduced IOP at 1-mM
       droplet concentrations, but the far less potent parent compound (
       amiloride) had no effect on IOP at tenfold higher concentration.
       Topical application of the carbonic anhydrase inhibitor dorzolamide
       reduced IOP in. . . mouse. Similarly, application of a selective
       Na.sup.+-K.sup.+-2Cl.sup.- symport inhibitor (bumetanide) itself had no
       significant effect. However, after first inhibiting the NHE
       antiports, either directly with acylguanidine blockers or indirectly
       with dorzolamide, the subsequent application of bumetanide triggered a
       highly significant further.
DETD
      Determining the Combined Effect in Vivo of Selective Blocking of Entry
       and Release Steps in Aqueous Humor Formation
            . by selectively and simultaneously (or by producing a combined
DETD
       effect in the patient) blocking both (1) the first step of
       aqueous humor formation (entry into the ciliary
       epithelium), and (2) the release step of Cl.sup. - from the
       aqueous humor. As discussed with regard to the entry
       step above, the NHE-1 exchanger can be selectively blocked or inhibited,
       which is important in the first step of aqueous humor
       formation. However, it is also possible to block activation of the final
       step of aqueous humor formation by applying, e.g.,
      A.sub.3-subtype adenosine-receptor antagonists.
DETD
         . . and analysis procedures as described in Example 2, to
       demonstrate the effect of blocking both entry and exit steps of
       aqueous humor formation in a test animal, an
       A.sub.3AR-knockout mice. The observations that A.sub.3AR agonists
       activate Cl.sup. - channel led to the hypothesis that these agonists
      would increase aqueous humor secretion and thereby
       IOP in vivo, and that A.sub.3AR antagonists would exert the opposite
      effects. In the absence of the.
DETD
            . the exit step (FIG. 5), blocking the entry step (with
       acetazolamide), reduced IOP even further by 2-3 mm Hg. The
       intraocular pressure cannot fall below the episcleral
       venous pressure, which in humans has been estimated to be 8.0-11.5 mm
      Hg. Thus, the.
DETD
            . effectively and synergistically lower IOP by: (1)
      double-blocking of uptake step, wherein both transporters in the first
       (entry step) of aqueous humor formation are blocked
      or inhibited; or (2) blocking of the entry and exit steps, wherein the
       sodium-hydrogen (Na/H) exchanger underlying. . . and also the
       activity is lowered or reduced of the chloride (Cl.sup.-) channels
       involved in the second (exit) step of aqueous humor
       formation.
CLM
      What is claimed is:
       1. A method for regulating, controlling or modulating aqueous
      humor secretion, comprising the step of administering to ciliary
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epithelial cells of the aqueous humor, an effective secretion-modulating amount of a combined modulator, which is, or forms, a combination of pharmaceutical compositions comprising an effective. .

- 4. The method of claim 1, wherein both transporters in the entry step of aqueous humor formation (the paired Na.sup.+/H.sup.+ and Cl.sup.-/HCO.sub.3.sup.- antiports and the Na.sup.+-K.sup.+-2Cl.sup.- symport) are blocked.
- 5. The method of claim 1, wherein secretion in the aqueous humor cells is elevated, and wherein the combined modulator is administered in an amount sufficient to reduce the elevated secretion.
- 6. The method of claim 1, wherein the method of regulating, controlling or modulating aqueous humor secretion further comprises regulating, controlling or modulating fluid pressure in the aqueous humor ciliary epithelial cells.
- 8. The method of claim 1, wherein the Na.sup.+/H.sup.+ exchange occurs at the NHE-1 antiport.
- 9. The method of claim 1, wherein the Cl.sup.-/HCO.sub.3.sup.- exchange occurs at the AE2 antiport.
- 13. The method of claim 12, wherein the modulating effect occurs in the formation of the aqueous humor of a human patient, comprising the step of administering to the patient an effective intraocular pressure-modulating amount of the combined modulator.
- 16. The method of claim 1, wherein the regulating, controlling or modulating effect of administering the combined modulator on aqueous humor formation is synergistic, as compared with an additive combination of the independent pharmaceutical compositions forming the combined modulator.
- 18. A method for regulating, controlling or modulating aqueous humor secretion, comprising the step of administering to ciliary epithelial cells of the aqueous humor, an effective secretion-modulating amount of a combined modulator which is, or forms, a combination of pharmaceutical compositions comprising at least one modulator that blocks or inhibits at least one entry step in the formation of the aqueous humor and at least one modulator that activity is lowers or reduces the activity of at least one exit step in the formation of the aqueous humor.
- 20. The method of claim 18, wherein chloride (Cl.sup.-) channels activity, involved in the exit step of aqueous humor formation, is lowered or reduced.
- 21. The method of claim 18, wherein secretion in the aqueous humor cells is elevated, and wherein the combined modulator is administered in an amount sufficient to reduce the elevated secretion.
- 22. The method of claim 18, wherein the method of regulating, controlling or modulating aqueous humor secretion, further comprises regulating, controlling or modulating fluid pressure in the aqueous humor ciliary epithelial cells.
- 27. The method of claim 26, wherein the modulating effect occurs in the formation of the aqueous humor of a human patient, comprising the step of administering to the patient an effective intraocular pressure-modulating amount of the combined modulator.
- 30. The method of claim 18, wherein the regulating, controlling or modulating effect of administering the combined modulator on aqueous humor formation is synergistic, as compared with an additive combination of the independent pharmaceutical

compositions forming the combined modulator.

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2609-46-3, Amiloride
        (combination therapy to treat glaucoma by controlling secretion of
        excess fluids into aq. humor)
=> d his
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     FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003
L1
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L2
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L3
              0 S ISOPROPYL ETHYL AMILORIDE
L4
            131 S AMILORIDE
L5
L6
              4 S ETHYL AMILORIDE
L7
              1 S CARIPORIDE/CN
     FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN,
     DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE,
     ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE,
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L8
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            507 S L7 OR ACRIPORIDE
L10
L11
           1505 S L7 OR CARIPORIDE
          95722 S L8 OR L9 OR L11
L12
L13
         159500 S GLAUCOMA
L14
          34931 S AQUEOUS HUMOR
L15
              0 S S ANTIPORT (S) MODULAT?
L16
            457 S ANTIPORT (S) MODULAT?
L17
            923 S ANTIPORT? (S) MODULAT?
L18
           9965 S L12 AND L13
L19
             13 S L18 AND L17
L20
             10 DUP REM L19 (3 DUPLICATES REMOVED)
L21
          82563 S INTRAOCULAR PRESSURE
L22
           5371 S L18 AND L21
L23
            730 S L14 AND L22
L24
           3138 S SODIUM PROTON (S) EXCHANGE
L25
              0 S L24 AND L23
L26
              0 S AE-2 ANTIPORT
L27
              3 S NHE-1 ANTIPORT
L28
              3 S NHE ANTIPORT
L29
            206 S NHE (S) ANTIPORT
L30
             30 S AE2 (S) ANTIPORT
L31
              4 S L29 AND L30
L32
              1 S L31 AND L23
L33
            232 S L29 OR L30
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              1 S L23 AND L33
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DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGLAUNCH,
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ACCESSION NUMBER:
                         1999:526549 CAPLUS
DOCUMENT NUMBER:
                         132:44914
TITLE:
                         Puerarin eyedrops: reduction of intraocular
                         pressure and determination in aqueous
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humor

Yan, Han-Ying; Zhu, Yan-Qin; Wu, Zheng-Hong; Chen, . AUTHOR (S): Research Center of Ocular Pharmacology, Jiangsu CORPORATE SOURCE: Provincial Institute of Materia Media, Nanjing, 210009, Peop. Rep. China SOURCE: Yanke Xinjinzhan (1999), 19(2), 73-77 CODEN: YAXIF2; ISSN: 1003-5141 Yanke Xinjinzhan Zazhi Bianweihui PUBLISHER: DOCUMENT TYPE: Journal Chinese LANGUAGE: Puerarin eyedrops: reduction of intraocular pressure and determination in aqueous humor AB Chronic ocular hypertension was produced in rabbits by injection of dexamethasone (0.5 mg every other day for 3 wk) into the bulbar subconjunctiva of the superior corneal margin of the rabbit eye; acute ocular hypertension was induced by rapid i.v. injection of glucose at 15 mg/kg. A reversed-phase HPLC method with UV detection was used to det. puerarin in aq. humor. The potency of 10 g puerarin/L in reducing intraocular hypertension was similar to that of 5 g timolol/L, but the duration of action of puerarin was longer than that of timolol. The pharmacokinetic parameters of puerarin in the aq. humor were: t1/2.alpha. = 0.69 h; t1/2.beta. = 8.32 h; Cmax = 0.963 mg/L; AUC = 5.16 mg/h/L; tmax = 2.0 h. Thus, 10-g/L puerarin eyedrops can decrease intraocular hypertension induced by i.v. injection of glucose and topical dexamethasone. The reversed-phase HPLC-UV method used is simple and sensitive for the detn. of puerarin in aq. humor. puerarin eyedrop intraocular hypertension ag humor HPLC; glaucoma puerarin eyedrop TT Eye (aq. humor; puerarin eyedrops: redn. of intraocular pressure and detn. in aq. humor by HPLC) Glaucoma (disease) TΤ (puerarin eyedrops: redn. of intraocular pressure and detn. in aq. humor by HPLC) Drug delivery systems TT (solns., ophthalmic; puerarin eyedrops: redn. of intraocular pressure and detn. in aq. humor by HPLC) IT3681-99-0, Puerarin RL: ANT (Analyte); BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); ANST (Analytical study); BIOL (Biological study) (puerarin eyedrops: redn. of intraocular pressure and detn. in aq. humor by HPLC) L35 ANSWER 171 OF 552 SCISEARCH COPYRIGHT 2003 THOMSON ISI on STN ACCESSION NUMBER: 1999:737621 SCISEARCH THE GENUINE ARTICLE: 238ZB TITLE: Metabolites of isopropyl unoprostane as potential ophthalmic solutions to reduce intraocular pressure in pigmented rabbits AUTHOR: Kashiwagi K (Reprint); Iizuka Y; Tsukahara S YAMANASHI MED UNIV, DEPT OPHTHALMOL, YAMANASHI 4093898, CORPORATE SOURCE: JAPAN (Reprint) COUNTRY OF AUTHOR: JAPAN SOURCE: JAPANESE JOURNAL OF PHARMACOLOGY, (SEP 1999) Vol. 81, No. 1, pp. 56-62. Publisher: JAPANESE PHARMACOLOGICAL SOC, EDITORIAL OFF, KANTOHYA BLDG GOKOMACHI-EBISUGAWA NAKAGYO-KU, KYOTO 604, ISSN: 0021-5198. DOCUMENT TYPE: Article; Journal FILE SEGMENT: LIFE LANGUAGE: English REFERENCE COUNT: *ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS* TI Metabolites of isopropyl unoprostane as potential ophthalmic solutions to reduce intraocular pressure in pigmented rabbits AΒ . . rabbits to clarify which metabolites are involved in actions in the eye. Tritium-labeled isopropyl unoprostone eyedrops were

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administered. The cornea, aqueous humor, iris, ciliary
     body and retina were then collected at 5, 15 or 30 min or at 2, 6 or 12.
           M1, and the further metabolized compound, M2, were detected; and the
     concentrations of these metabolites decreased with time. In the
     aqueous humor, M1, M2 and another metabolite, M3, were
     detected, with peak concentrations of M1 at 30 min and M2 at 2.
     iris and ciliary body showed a similar metabolism with peak concentrations
     of M1 and M2 at 30 min. In the aqueous humor, iris and
     ciliary body, M2 was the dominant metabolite from 30 min. In the retina,
     only total radioactivity was detected...
     Author Keywords: isopropyl unoprostone; prostaglandin; glaucoma;
     metabolism; esterase
    KeyWords Plus (R): PROSTAGLANDIN-RELATED COMPOUND; AQUEOUS-
     HUMOR DYNAMICS; TOPICAL APPLICATION; UF-021; GLAUCOMA;
     EYES; PHARMACOKINETICS; TIMOLOL; DRUG; IRIS
L35 ANSWER 172 OF 552 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V. on STN
ACCESSION NUMBER:
                   2000060014 EMBASE
                    Brimonidine 0.2% behaviour on intraocular
TITLE:
                    pressure in Timolol-uncontrolled
                    glaucomatous patients.
                    Centofanti M.; Manni G.L.; Gregori D.; Parisi V.; Cocco F.;
AUTHOR:
                    Bucci M.G.
CORPORATE SOURCE:
                    M. Centofanti, Eye Clinic, University 'Tor Vergata' of
                    Rome, Roma, Italy
                    Acta Ophthalmologica Scandinavica, Supplement, (1999)
SOURCE:
                    77/229 (52).
                    Refs: 5
                    ISSN: 1395-3931 CODEN: AOSSFB
COUNTRY:
                    Denmark
                    Journal; Conference Article
DOCUMENT TYPE:
FILE SEGMENT:
                    012
                            Ophthalmology
                    030
                            Pharmacology
                    037
                            Drug Literature Index
LANGUAGE:
                    English
     Brimonidine 0.2% behaviour on intraocular pressure in
     Timolol-uncontrolled glaucomatous patients.
     Medical Descriptors:
       *glaucoma: DT, drug therapy
       *intraocular pressure
       aqueous humor flow
     drug binding
     drug efficacy
       open angle glaucoma: DT, drug therapy
     pressure volume curve
    pulsatile drug release
     receptor affinity
     tonometry
     human
     clinical article
     male
     female
     aged
     adult
     conference paper
    priority journal
     *alpha adrenergic receptor stimulating agent: CM, drug.
    pharmacology
     *alpha adrenergic receptor stimulating agent: TP, topical drug
     administration
     *brimonidine: CM, drug comparison
     *brimonidine: DT, drug therapy
     *brimonidine: PD, pharmacology
     *brimonidine: TP, topical drug administration
       *timolol: DT, drug therapy
     alpha 2 adrenergic receptor: EC, endogenous compound
     apraclonidine: CM, drug comparison
    beta adrenergic receptor blocking agent: DT, drug therapy
    clonidine: CM,.
```

ST

ΤI

CT

.RN (brimonidine) 59803-98-4; (timolo1) 26839-75-8; (apraclonidine) 66711-21-5; (clonidine) 4205-90-7, 4205-91-8, 57066-25-8

L35 ANSWER 173 OF 552 SCISEARCH COPYRIGHT 2003 THOMSON ISI on STN

ACCESSION NUMBER: 2000:160250 SCISEARCH

THE GENUINE ARTICLE: 286HX

TITLE: Brimonidine 0.2 (behaviour on intraocular

pressure in Timolol-uncontrolled

glaucomatous patients

AUTHOR: Centofanti M (Reprint); Manni G L; Gregori D; Parisi V;

Cocco F: Bucci M G

CORPORATE SOURCE: UNIV ROMA TOR VERGATA, EYE CLIN, ROME, ITALY (Reprint); GB

BIETTI FDN OPHTHALMOL, ROME, ITALY; FATEBENEFRATELLI HOSP,

OCULUST DIV, AFAR CRCCS, ROME, ITALY

COUNTRY OF AUTHOR: ITALY

SOURCE: ACTA OPHTHALMOLOGICA SCANDINAVICA, (SEP 1999) Vol. 77,

Supp. [229], pp. 52-52.

Publisher: SCRIPTOR PUBLISHER, SOVANGSVEJ 1-5, DK-2650

HVIDOVRE, DENMARK. ISSN: 1395-3907. Article; Journal

FILE SEGMENT: CLIN LANGUAGE: English

REFERENCE COUNT: 5

DOCUMENT TYPE:

TI Brimonidine 0.2(behaviour on intraocular pressure in

Timolol-uncontrolled glaucomatous patients

ST Author Keywords: beta-blocker; alpha-adrenoceptor agonist; long-term

drift; glaucoma

STP KeyWords Plus (R): AQUEOUS-HUMOR DYNAMICS;

ALPHA-2-ADRENERGIC AGONISTS

L35 ANSWER 174 OF 552 MEDLINE on STN DUPLICATE 31

ACCESSION NUMBER: 2000105853 MEDLINE

DOCUMENT NUMBER: 20105853 PubMed ID: 10641099

TITLE: [Alpha-2 adrenergic agonists in the treatment of

glaucoma].

Agonistii alfa 2 adrenergici in tratamentul glaucomului.

AUTHOR: Apatachioae I; Chiselita D

SOURCE: OFTALMOLOGIA, (1999) 47 (2) 35-40. Ref: 28

Journal code: 9111247. ISSN: 1120-0875.

PUB. COUNTRY: Romania

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

General Review; (REVIEW)

(REVIEW, TUTORIAL)

LANGUAGE: Romanian

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200002

AB

ENTRY DATE: Entered STN: 20000209

Last Updated on STN: 20030204 Entered Medline: 20000203

TI [Alpha-2 adrenergic agonists in the treatment of glaucoma].

Agonistii alfa 2 adrenergici in tratamentul glaucomului.

The study represent an up-to-date of the role and place of alpha

2-adrenergic agonists in **glaucoma** treatment. The first

available alpha 2-agonist, clonidine is of historical importance today.

Apraclonidine decrease the aqueous humor secretion and

episcleral venous pressure. It is employed to prevent or blunt the acute

intraocular pressure rise after ocular laser therapy.

It is not recommended as long term therapy due to its high incidence of local adverse reactions and tachyphylaxis. Brimonidine became the alpha

2-agonist of choice in glaucoma chronic treatment, acting by

decreasing aqueous humor secretion and increasing

uveoscleral outflow. It has a lower incidence of the ocular adverse

effects because of greater alpha 2 selectivity. Brimonidine has neuroprotective effect, which is an important feature in the new contexts

of **glaucoma** pathogenesis. Brimonidine has hypotensor effect similar with **timolol** but with a greater incidence of adverse

local reactions. It has been no effects on cardiopulmonary function.

Brimonidine would be.

```
TJ.
therapeutic use
      Clonidine: AE, adverse effects
      Clonidine: AA, analogs & derivatives
      Clonidine: PD, pharmacology
      Clonidine: TU, therapeutic use
      English Abstract
       *Glaucoma: DT, drug therapy
        Glaucoma: PP, physiopathology
        Intraocular Pressure: DE, drug effects
      Quinoxalines: AE, adverse effects
      Quinoxalines: PD, pharmacology
      Quinoxalines: TU, therapeutic use
     *Receptors, Adrenergic, alpha-2: AG,.
L35 ANSWER 175 OF 552 CAPLUS COPYRIGHT 2003 ACS on STN DUPLICATE 32
                         1999:115495 CAPLUS
ACCESSION NUMBER:
                         130:280147
DOCUMENT NUMBER:
                         Aqueous humor dynamics in
TITLE:
                         .alpha.-chymotrypsin-induced ocular hypertensive
                         rabbits
                         Melena, Jose; Santafe, Juan; Segarra-Domenech, Jose;
AUTHOR (S):
                         Puras, Gustavo
                         Departamento de Framacologia, Facultad de Farmacia,
CORPORATE SOURCE:
                         Universidad del Pais Vasco, Paseo de la Universidad,
                         Vitoria, Spain
                         Journal of Ocular Pharmacology and Therapeutics
SOURCE:
                         (1999), 15(1), 19-27
                         CODEN: JOPTFU; ISSN: 1080-7683
PUBLISHER:
                         Mary Ann Liebert, Inc.
DOCUMENT TYPE:
                         Journal
LANGUAGE:
                         English
                               THERE ARE 19 CITED REFERENCES AVAILABLE FOR THIS
REFERENCE COUNT:
                         19
                               RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
     Aqueous humor dynamics in .alpha.-chymotrypsin-induced
     ocular hypertensive rabbits
     Aq. humor dynamics were studied in .alpha.-chymotrypsin-induced ocular
AΒ
     hypertensive rabbits either by tonog. or two-level const. pressure
     perfusion techniques. A significant correlation was obtained between the
     values of outflow facility in .alpha.-chymotrypsin-induced ocular
     hypertensive rabbits as detd. by tonog. and const. pressure perfusion.
     The mean value of tonog. outflow facility in ocular hypertensive rabbits
     was not statistically different from that found in ocular normotensive
     rabbits. On the contrary, the estd. rate of aq. inflow in ocular
     hypertensive rabbits was about 1.5-fold higher than that of ocular
     normotensive ones. While topical timolol lowered
     intraocular pressure and aq. humor inflow in ocular
     hypertensive rabbits, pilocarpine did not produce any significant effect.
     Aq. humor protein was significantly increased in ocular hypertensive eyes.
     The results of this study show that accurate measurements of outflow
     facility can be obtained in .alpha.-chymotrypsin-induced ocular
     hypertensive rabbits by tonog. technique. The data suggest that the
     long-term ocular hypertension induced by .alpha.-chymotrypsin in albino
     rabbits may be secondary to an increase in the rate of aq. humor inflow,
     likely produced by a breakdown of the blood-aq. barrier. This finding
     strongly conflicts with the hypothesis of trabecular blockage as the cause
     of .alpha.-chymotrypsin-induced ocular hypertension in this species.
ST
     aq humor chymotrypsin glaucoma ocular hypertension
     Glaucoma (disease)
IT
     Rabbit
        (aq. humor dynamics in .alpha.-chymotrypsin-induced ocular hypertensive
        rabbits)
IT
     Disease models
        (glaucoma; aq. humor dynamics in .alpha.-chymotrypsin-induced
        ocular hypertensive rabbits)
IT
     92-13-7, Pilocarpine 26839-75-8, Timolol
     RL: BAC (Biological activity or effector, except adverse); BSU (Biological
     study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES
     (Uses)
```

(ocular hypertension induced by .alpha.-chymotrypsin in rabbits

sensitivity to) L35 ANSWER 176 OF 552 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC. on STN DUPLICATE 33 ACCESSION NUMBER: 1999:150148 BIOSIS DOCUMENT NUMBER: PREV199900150148 Prolonged, contemporaneous administration of pilocarpine TITLE: and timolol increases the aqueous humor pilocarpine levels in rabbits. Burgalassi, S.; Chetoni, P. (1); Panichi, L.; Saettone, M. AUTHOR (S): (1) Dep. Pharmaceutical Sci., Lab. Pharmaceutical Technol. CORPORATE SOURCE: Biopharmaceutics, Univ. Pisa, I-56126 Pisa Italy Journal of Ocular Pharmacology and Therapeutics, (Feb., SOURCE: 1999) Vol. 15, No. 1, pp. 1-7. ISSN: 1080-7683. DOCUMENT TYPE: Article English LANGUAGE: Prolonged, contemporaneous administration of pilocarpine and timolol increases the aqueous humor pilocarpine levels in rabbits. AB The purpose of this study was to gather information on the mechanism by which timolol/pilocarpine (TI/PI) combination eyedrops provide additive ocular hypotensive effects. An hypothesis, according to which the combination eyedrops prolong the intraocular permanence of PI as a consequence of decreased aqueous humor secretion induced by TI, was not supported by clear-cut literature evidence. It was thus sought to verify if repeated instillations. . . PI hydrochloride alone (2% w/v), buffered at pH 5.5 and 6.8, were instilled b.i.d. in albino rabbits for five days. Aqueous humor samples, analyzed after the last treatment, showed that the aqueous humor PI levels observed after administration of the combination eyedrops were significantly higher than those resulting from administration of the reference. . . with the pH 6.8 reference solution, the pH 5.5 one produced slightly higher and more sustained drug levels in the aqueous humor. The present results appear to confirm the assumption that an increased retention of PI in the aqueous humor is responsible for the additive effects on intraocular pressure reported by several authors for the combination TI/PI eyedrops. ITMajor Concepts Pharmacology; Sense Organs (Sensory Reception) IT Diseases open-angle glaucoma: eye disease, treatment ΙT Chemicals & Biochemicals pilocarpine: antiglaucoma - drug, aqueous human levels, contemporaneous administration, prolonged administration; timolol: antiglaucoma - drug, contemporaneous administration, prolonged administration IT Alternate Indexing Glaucoma, Open-Angle (MeSH) IT Miscellaneous Descriptors intraocular pressure RN 92-13-7 (PILOCARPINE) 26839-75-8 (TIMOLOL) L35 ANSWER 177 OF 552 USPATFULL on STN ACCESSION NUMBER: 1998:115761 USPATFULL Prophylactic and therapeutic methods for ocular TITLE: degenerative diseases and inflammations and histidine compositions therefor INVENTOR(S): Thomas, Peter G., Charlottesville, VA, United States

Cytos Pharmaceuticals LLC, Durham, NC, United States

NUMBER KIND DATE -----PATENT INFORMATION: US 5811446 19980922

(U.S. corporation)

PATENT ASSIGNEE(S):

APPLICATION INFO.: US 8398054 19970418 (8)

DOCUMENT TYPE: Utility
FILE SEGMENT: Granted
PRIMARY EXAMINER: Kight, John

ASSISTANT EXAMINER: Covington, Raymond

LEGAL REPRESENTATIVE: Angres, Isaac A., Petraglia, Susan P.

NUMBER OF CLAIMS: 45 EXEMPLARY CLAIM: 1 LINE COUNT: 1037

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

SUMM . . . vision also arises as a result of ischemia-reperfusion injury that is associated with retinal arterial occlusion, retinal venous occlusion, and glaucoma.

SUMM . . . the eye, and especially the cornea. Physical trauma to the cornea may be accompanied by intraocular inflammation, synechiae leading to glaucoma, and secondary membrane formation. Collagen is the major structural protein of the cornea. The normal host response to inflammation produces. . .

Degenerative eye conditions within the purview of the preferred aspects of the invention include, for example, **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), corneal amyloidosis, age-related macular degeneration, retinal photic injury,. . .

SUMM . . . effectively treat ocular inflammation and its attendant cell damage associated with, for example, one or more diseases or degenerations including **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), corneal amyloidosis, age-related macular degeneration, retinal photic injury, . . .

SUMM . . . bind collagen (and glycoaminoglycans as well) of the stromal matrix, causing hydration or swelling and shortening of the collagen fibrils. Glaucoma is a common sequela of alkali burns, due to a rapid rise in intraocular pressure attributable to this shortening of collagen fibrils. The alkali also renders the collagen fibrils more susceptible to enzymatic degradation ("naked. . . cells are not known to contain either latent or active collagenase. Further, if the alkali penetrates the ciliary body, the aqueous humor experiences a significant drop in aqueous glucose and ascorbate concentrations. Ascorbate is essential to the biosynthesis of both collagen and. . .

SUMM . . . chromic acid, nitric acid, and acetic acid. Acid burns cause tissue damage by coagulating and precipitating ocular proteins, and secondary glaucoma as the result of reacting with collagen (by fibril shortening.) In both alkali and acid burns, the course of therapy. . . usually entails irrigating the eye, followed by administration of one or more of topical antibiotics, topical steroids, collagenase inhibitors, and anti-glaucoma agents, oral or topical ascorbate. It is intended that histidine be administered therapeutically following irrigation of the eye injured by. . . 0.3% gentamicin drops or bacitracin ointment), topical steroids (e.g., 1% prednisolone, or 0.1% dexamethasone), collagenase inhibitors (e.g., 10-20% acetyl cysteine), anti-glaucoma agents (e.g, 10% phenylephrine) in combination with 2% atropine (a cycloplegic), and oral or topical ascorbate.

SUMM . . . injury, a penetrating injury, or a perforating foreign body which may be accompanied by intraocular inflammation, synechiae which leads to glaucoma, and secondary membrane formation. It is equally envisioned that histidine be administered during and after suturing to reduce the inflammation. . .

SUMM . . . cycloplegic exemplified by atropine; a moitic exemplified by physostigmine, pilocarpine, and carbachol; an antiglaucoma agents exemplified by phenylephrine, acetazolamide, and timolol maleate; a collagenase inhibitor exmeplified by acetyl cysteine; a glycoprotein such as fibronectin and vitronectin, as well as analogs or.

DETD The following combination therapy as an ophthalmic solution is intended to reduce inflammation and intraocular pressure following photoablation of the cornea to improve wound healing:

DETD . . . eye drops (5.0 wt. % histidine, 2-4 drops, 4 times daily) oral

acetazolamide (250 mg, 4 times daily) (for secondary **glaucoma** therapy) is suitable for alkali burns.

What is claimed is:

2. The method according to claim 1 wherein said degenerative eye condition comprises **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), corneal amyloidosis, age-related macular degeneration, retinal photic injury, . . .

6. The method according to claim 5 wherein said degenerative eye condition comprises **glaucoma**, diabetic retinopathy, disease-based posterior vitreous detachment (PVD), age-based posterior vitreous detachment (PVD), Dellen, Terrein's Marginal Degeneration, or calcific band keratopathy.

. antiviral agent, a corticosteroid, an hydroxyacid, a ketoacid, a non-steroidal antiinflammatory agent, a cycloplegic, a miotic, a collagenase inhibitor, an anti-glaucoma agent, a carbonic anhydrase inhibitor, a glycoprotein, and silver nitrate.

. amantadine, rimantadine, dexamethasone, prednisolone, prednisone, fluorometholone, betamethasone, hydrocortisone, ketorolac, indomethacin, flurbiprofen, ketoprofen, loxoprofen, diclofenac, atropine, pilocarpine, carbachol, physostigmine, phenylephrine, acetazolamide, timolol maleate, fibronectin and vitronectin as well as analogs or fragments thereof, and acetyl cysteine.

. antioxidant, an antiviral, a corticosteroid, an hydroxyacid, a ketoacid, a non-steroidal antiinflammatory, a cycloplegic, a miotic, a collagenase inhibitor, an anti-glaucoma agent, a carbonic anhydrase inhibitor, a glycoprotein, and silver nitrate.

. amantadine, rimantadine, dexamethasone, prednisolone, prednisone, fluorometholone, betamethasone, hydrocortisone, ketorolac, indomethacin, flurbiprofen, ketoprofen, loxoprofen, diclofenac, atropine, pilocarpine, carbachol, physostigmine, phenylephrine, acetazolamide, timolol maleate, fibronectin and vitronectin as well as analogs or fragments thereof, and acetyl cysteine.

. hydrocortisone, an .alpha.-hydroxyacid, a .beta.-hydroxyacid, an .alpha.-ketoacid, a .beta.-ketoacid, ketorolac, indomethacin, flurbiprofen, loxoprofen, diclofenac, atropine, pilocarpine, carbachol, physostigmine, phenylephrine, acetazolamide, timolol maleate, fibronectin and vitronectin as well as analogs or fragments thereof, acetyl cysteine, or mixtures thereof.

L35 ANSWER 178 OF 552 USPATFULL on STN

ACCESSION NUMBER: 1998:115758 USPATFULL

TITLE: Combinations of prostaglandins and clonidine

derivatives for the treatment of glaucoma

DeSantis, Jr., Louis, Fort Worth, TX, United States

Sallee, Verney L., Southlake, TX, United States

Alcon Laboratories, Inc., Fort Worth, TX, United States

(U.S. corporation)

NUMBER KIND DATE

PATENT INFORMATION: APPLICATION INFO.: RELATED APPLN. INFO.:

PATENT ASSIGNEE(S):

INVENTOR(S):

US 5811443 19980922 US 8036675 19970221 (8)

Continuation of Ser. No. 571326, filed on 12 Dec 1995, now patented, Pat. No. 5605922 which is a continuation of Ser. No. 422570, filed on 10 Apr 1995, now patented, Pat. No. 5480900 which is a continuation of Ser. No. 213380, filed on 14 Mar 1994, now abandoned which is a continuation of Ser. No.

960065, filed on 13 Oct 1992, now abandoned

DOCUMENT TYPE: Utility
FILE SEGMENT: Granted
PRIMARY EXAMINER: Fay, Zohreh

CLM

LEGAL REPRESENTATIVE: Copeland, Barry L.

NUMBER OF CLAIMS: 13
EXEMPLARY CLAIM: 1
LINE COUNT: 500

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

TI Combinations of prostaglandins and clonidine derivatives for the treatment of **glaucoma**

AB Combinations of at least one clonidine derivative and at least one prostaglandin are used to treat **glaucoma** and ocular hypertension without some of the side effects typically associated with

topical administration of prostaglandins.

The present invention relates generally to the field of ophthalmology. In particular, the invention relates to the treatment of **glaucoma** and ocular hypertension using a combination of at least one clonidine derivative (e.g., para-amino clonidine) and at least one prostaglandin

prostaglandin.

SUMM

Although the underlying causes of glaucoma are not understood, its symptoms often include elevated intraocular pressure, which may be caused either by over-production of aqueous humor or by inadequate outflow of aqueous humor. If left untreated, or if inadequately treated, glaucoma can lead to blindness or significant loss of vision. There is therefore a continuing need for therapies which control the elevated intraocular pressure associated with glaucoma.

There are currently a number of drugs utilized in the treatment of glaucoma, including: miotics (e.g., pilocarpine, carbachol and acetylcholinesterase inhibitors); sympathomimetics (e.g., epinephrine and dipivalylepinephrine); alpha-2 agonists (e.g., para-amino clonidine); beta-blockers (e.g., betaxolol, levobunolol and timolol); and carbonic anhydrase inhibitors (e.g., acetazolamide, methazolamide and ethoxzolamide). Miotics and sympathomimetics are believed to lower IOP by increasing the outflow of aqueous humor through the trabecular meshwork, while beta-blockers, alpha-2 agonists and carbonic anhydrase inhibitors are believed to lower IOP by decreasing the formation of aqueous humor

humor.
In addition, although they have not yet been approved for anti-

glaucoma therapy, certain classes of prostaglandins and
prostaglandin analogues (hereinafter collectively referred to as
"prostaglandins") have been shown in various animal models and in some
clinical studies to reduce intraocular pressure

(IOP) to a greater extent than most currently used therapeutic agents. See, for example: U.S. Pat. No. 4,097,489 (Bundy), U.S.. . . et al.). In contrast to the case with miotics, prostaglandins are believed to lower IOP by increasing the outflow of aqueous humor

via the uveo-scleral route. In addition, prostaglandins may possibly have other effects in the eye, such as enhancing vascular support.

SUMM . . . can also cause serious side effects which affect patient compliance and/or necessitate the withdrawal of treatment; at least one beta-blocker, timolol, has increasingly become associated with serious pulmonary side effects attributable to its effect on beta-2 receptors in pulmonary tissue; and. . . day. Patient compliance with such complicated dosage regimens can be very poor, particularly in elderly patients. Since the majority of glaucoma patients are elderly, this patient compliance problem is significant.

SUMM In light of the foregoing circumstances, it is clear that a need exists for new, more potent anti-glaucoma compositions which avoid or reduce the above-cited side effects, while increasing patient compliance. The present invention is directed to such. . .

SUMM . . . been found that administration of one or more prostaglandins in combination with one or more clonidine derivatives controls or lowers intraocular pressure (IOP) without the accompanying inflammatory response (including hyperemia) typically found with prostaglandins. The present invention therefore provides compositions and methods useful for the treatment of glaucoma and ocular hypertension. The compositions contain a combination of at least one clonidine derivative and at least one prostaglandin which. . .

DETD The present invention utilizes combinations of at least one clonidine

```
derivative and at least one prostaglandin to treat glaucoma
       and ocular hypertension.
             . of this compound are incorporated herein by reference. It is
DETD
       also known that certain clonidine derivatives are effective in lowering
       intraocular pressure when applied topically to the
       eye; this discovery is described in U.S. Pat. No. 4,461,904 (York, Jr.),
       the entire contents.
                and their pharmaceutically acceptable esters and salts
DETD
       (hereinafter collectively referred to as "prostaglandins" or "PG's"),
       which are capable of reducing intraocular pressure
       when applied topically to the eye. Such prostaglandins include the
       natural compounds: PGE.sub.1, PGE.sub.2, PGE.sub.3, PGF.sub.1.alpha.,
       PGF.sub.2.alpha., PGF.sub.3.alpha., PGD.sub.2 and.
DETD
       The present invention is also directed to methods of treating
       glaucoma and other ophthalmic diseases and abnormalities. The
       methods comprise topically applying to the affected eye(s) of the
       patient a therapeutically.
       What is claimed is:
CLM
       1. A topical ophthalmic composition for the treatment of
       glaucoma, comprising a combination of a pharmaceutically
       effective amount of at least one prostaglandin and a pharmaceutically
       effective amount of at.
       8. A method of treating glaucoma, comprising applying to an
       affected eye a pharmaceutically effective amount of at least one
       prostaglandin and a pharmaceutically effective amount.
=> d his
     (FILE 'HOME' ENTERED AT 18:29:32 ON 27 JUL 2003)
     FILE 'REGISTRY' ENTERED AT 18:29:44 ON 27 JUL 2003
L1
              1 S TIMOLOL/CN
L2
              1 S AMILORIDE/CN
L3
              0 S ETHYL ISOPROPYL AMILORIDE
L4
              O S ISOPROPYL ETHYL AMILORIDE
L5
            131 S AMILORIDE
L6
              4 S ETHYL AMILORIDE
L7
              1 S CARIPORIDE/CN
     FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, BIOSIS, CANCERLIT, CAPLUS, CEN,
     DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, EMBAL, EMBASE,
     ESBIOBASE, IFIPAT, IPA, JICST-EPLUS, KOSMET, LIFESCI, MEDICONF, MEDLINE,
     NAPRALERT, NLDB, NUTRACEUT, PASCAL, PCTGEN, ...' ENTERED AT 18:33:21 ON
     27 JUL 2003
L8
          31558 S L1 OR TIMOLOL
L9
          64288 S L2 OR AMILORIDE
L10
            507 S L7 OR ACRIPORIDE
L11
           1505 S L7 OR CARIPORIDE
L12
          95722 S L8 OR L9 OR L11
L13
         159500 S GLAUCOMA
L14
          34931 S AQUEOUS HUMOR
L15
              0 S S ANTIPORT (S) MODULAT?
L16
            457 S ANTIPORT (S) MODULAT?
L17
            923 S ANTIPORT? (S) MODULAT?
L18
           9965 S L12 AND L13
L19
             13 S L18 AND L17
L20
             10 DUP REM L19 (3 DUPLICATES REMOVED)
L21
          82563 S INTRAOCULAR PRESSURE
L22
           5371 S L18 AND L21
L23
            730 S L14 AND L22
L24
           3138 S SODIUM PROTON (S) EXCHANGE
L25
              0 S L24 AND L23
L26
              0 S AE-2 ANTIPORT
L27
              3 S NHE-1 ANTIPORT
L28
              3 S NHE ANTIPORT
L29
            206 S NHE (S) ANTIPORT
L30
             30 S AE2 (S) ANTIPORT
L31
              4 S L29 AND L30
```

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1 S L31 AND L23
.L32
            232 S L29 OR L30
L33
L34
            1 S L23 AND L33
L35
            552 DUP REM L23 (178 DUPLICATES REMOVED)
=> s 111 and 113
 95% OF LIMIT FOR L#S REACHED
             9 L11 AND L13
=> dup rem
ENTER L# LIST OR (END):136
DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGLAUNCH,
DRUGMONOG2, KOSMET, MEDICONF, NUTRACEUT, PCTGEN, PHARMAML'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L36
L37
              4 DUP REM L36 (5 DUPLICATES REMOVED)
=> d 137 1-4 ibib, kwic
L37 ANSWER 1 OF 4 USPATFULL on STN
ACCESSION NUMBER:
                       2003:120743 USPATFULL
TITLE:
                       Novel combination therapy to treat glaucoma
INVENTOR(S):
                       Civan, Mortimer M., Wynnewood, PA, UNITED STATES
                       Jacobson, Kenneth A., Silver Spring, MD, UNITED STATES
                       MacKnight, Anthony D.C., Dunedin, NEW ZEALAND
                       Mitchell, Claire H., Philadelphia, PA, UNITED STATES
                       Stone, Richard A., Havertown, PA, UNITED STATES
                            NUMBER
                                        KIND
                                                DATE
                       _____
PATENT INFORMATION:
                                       A1
                       US 2003083227
                                               20030501
APPLICATION INFO.:
                       US 2002-217755
                                        A1
                                               20020813
                                                        (10)
RELATED APPLN. INFO.:
                       Continuation-in-part of Ser. No. US 2002-9581, filed on
                       30 Apr 2002, PENDING
                              NUMBER
                                          DATE
                       -----
PRIORITY INFORMATION:
                       US 1999-133180P 19990507 (60)
                       US 2001-312036P 20010813 (60)
DOCUMENT TYPE:
                       Utility
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CAS INDEXING IS AVAILABLE FOR THIS PATENT.
TΤ
      Novel combination therapy to treat glaucoma
SUMM
       . . . The present invention relates to the field of ophthalmology. In
       particular, the invention relates to the prevention and treatment of
       glaucoma and associated elevations of intraocular pressure.
SUMM
            . the world, currently affecting an estimated three million
       people in the United States, with 300,000 new cases diagnosed every
       year. Glaucoma results from obstructed outflow from the
       aqueous humor of the eye, resulting in elevated intraocular pressure in
       the anterior chamber,. . . can also be caused by other conditions,
       such as impaired intraocular fluid transport caused by eye surgery,
       including surgery for glaucoma. The IOP, itself, reflects a
       balance between the rates of inflow (fluid formation) and outflow (fluid
       return) of the aqueous humor by re-absorption. Medical approaches to
       treating glaucoma are frequently directed at reducing the rate
       of net formation of aqueous humor.
SUMM
         . . Ophthalmol. Vis. Sci. 17:958-981 (1978); Walker et al., 1999;
      Wolosin et al., In: The Eye's Aqueous Humor: From Secretion to
      Glaucoma, Civan (ed), Academic Press, Boston, pp 135-162
       (1998)).
SUMM
       . . . use of systemic and topical drugs for lowering intraocular
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pressure. At the present time, medical control of intraocular pressure and glaucoma consists of topical, oral or intravitreous administration of many compounds. See generally, Horlington, U.S. Pat. No. 4,425,346; Komuro et al.,. [0015] Among the most effective medical therapies for glaucoma SUMM are strategies aimed at reducing intraocular pressure by reducing the net rate of aqueous humor formation by the ocular ciliary epithelial bilayer (see generally, Shields, Textbook of Glaucoma, 3rd Ed., Williams & Wilkins, Baltimore (1992)). This can occur either by blocking unidirectional secretion from stroma to the aqueous. [0016] Four primary classes of drugs are used to treat glaucoma SUMM . These include: miotics (e.g., pilocarpine, carbachol and acetylcholinesterase inhibitors); sympathomimetics (e.g., epinephrine, metipranolol, dipivefrin, carbachol, dipivalyl, and parnaminoclonidine); beta-blockers (e.g.,. than normal intraocular pressure can also be problematic, SUMM caused for example, by a variety of conditions, such as surgery for glaucoma, retinal detachment, uveitis, and the like. However, since no drugs are presently available for the safe and effective prevention, modulation. . level, although primarily the invention will be useful to SUMM relieve or prevent elevated levels of intraocular fluid in, for example, glaucoma patients, before vision is adversely and permanently affected. In addition, the present combined therapeutic methods permit known compounds to be. DETD [0031] The methods and compositions of the present invention are intended for treatment of glaucoma and other conditions, which manifest elevated intraocular pressure in the eye of a patient, particularly human patients, but also including other mammalian hosts. Glaucoma is a term which embraces a group of ocular diseases characterized by elevated intraocular pressure levels which can damage the eye, and destroy the optic nerve and related ganglia. In addition, normotensive glaucoma is characterized by an apparent nonelevated intraocular pressure. However, for the patient suffering from normotensive glaucoma, the apparently normal pressure is sufficiently high for that particular patient as to cause the same types of nerve and. . antiports provide the dominant entry pathway under DETD physiological conditions, and further suggested that carbonic anhydrase inhibitors (commonly used to treat glaucoma) act by blocking Na.sup.+/H.sup.+ exchange. More recently an electron-probe X-ray microanalysis (McLaughlin et al., Am. J. Physiol. Cell Physiol. 281:C865-C875(2001)). DETD . and it is desirable that such elevated pressures be lowered to below 18 mm Hg. In the case of low-tension glaucoma, it is desirable for the intraocular pressure to be lowered below that exhibited by the patient prior to treatment. Intraocular. DETD generally considered below about 8 mm Hq. Such conditions may result from a variety of causes, such as surgery for glaucoma, retinal detachment, uveitis, and the like. DETD [0048] The exemplified inhibitors described in detail in the Examples include cariporide, EIPA (ethylisopropylamiloride), DMA (dimethylamiloride) and amiloride, at concentrations characteristic of the NHE-1 isoform. Nevertheless, applicable compounds would include any . such as timolol), or amiloride analogs, as well as, but not limited to, the many compounds produced by Hoechst, i.e., cariporide, as well as other compounds that would be recognized as modulators of Na.sup.+ uptake or the anion exchange system. See,. DETD . composition, which can include drugs, compounds, pharmaceuticals or the like, can be used to treat an individual, such as a **glaucoma** patient. DETD and Cl.sup.-/HCO.sub.3.sup.- antiports) and the effect of blocking both, also explains the clinical efficacy of carbonic anhydrase inhibitors in treating glaucoma. Reducing the availability of H.sup.+ and HCO.sub.3.sup.- to both antiports, thereby synergistically

inhibits the initial step in aqueous humor secretion.. . . this step could be selectively blocked in glaucomatous patients by specifically

inhibiting NHE-1 with low concentrations of EIPA, DMA or